

ANALYSIS (AN) OF 422 RECENT <sup>xxx</sup>  
LAPAROTOMIES <sup>xxx</sup>

SUPPLEMENT

TO THE  
PITTSBURGH MEDICAL REVIEW.



422 Recent  
Abdominal Sections.





# AN ANALYSIS

— OF —

Four hundred and Twenty-two recent, unselected American  
Laparotomies.



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# UNSELECTED AMERICAN LAPAROTOMIES.

The editors of the REVIEW propose to continue this effort of collating the statistics of American laparotomy, and they offer the following pages as the initial installment of a work that they trust will, in the future, rise to the dignity of an acceptable contribution to the literature of abdominal surgery.

Laparotomies for removal of ovarian and parovarian tumors.....	207
Laparotomies for removal of ovaries not the seat of tumor.....	115
Laparotomies for other purposes than the removal of ovaries.....	100

AGE.	NO. CASES.	NO. DEATHS.	MORTALITY.
Between 15 and 20 years.	8	1	12.5 per cent.
“ 21 “ 30 “	50	5	10. “
“ 31 “ 40 “	60	7	11.7 “
“ 41 “ 50 “	50	9	18. “

Total number tapped.....	39
Number of patients not tapped.....	124
Tapping not noted in.....	44
124 cases not tapped, 13 died.....	10.5 per cent.
39 " " 6 " .....	15.4 "



## TIME SINCE FIRST NOTICED.

Length of time not stated in.....	52
Tumor unnoticed before operation.....	4
Noticed 1 year or less before operation.....	69
"    between 1 and 2 years before operation.	39
"    "    2 "    3 "    "    "    "	12
"    "    3 "    4 "    "    "    "	12
"    "    4 "    30 "    "    "    "	19

Of these last 19, but 1 died.

Of 155 cases, in which the length of time since the discovery of the disease is noted, the average time was 2 years and 7 months.

Of these, 136 recovered, and the average time in these successful cases was 2 years and 9 months; 19 died, and the average time in these fatal cases was 1 year and six months.

## NATURE AND SIZE OF TUMORS.

Of 147 tumors whose character was specified, there were 70 multilocular ovarian cysts (66 single; 2 double) from 68 patients, of whom 6 died;

29 unilocular ovarian cysts from 29 patients, of whom 2 died;

14 dermoid cysts (10 single; 2 double) from 12 patients, of whom none died;

12 parovarian cysts from 12 patients, of whom none died;

6 papillomata (2 single; 2 double) from 4 patients, of whom 1 died;

6 sarcomata from 6 patients, of whom 3 died;

5 carcinomata (3 single; 1 double) from 4 patients, of whom 3 died;

3 fibro-cysts from 3 patients, of whom none died;

1 fibroma (ovarian); patient recovered.

1 myxoma; patient recovered.

Of 155 cases in which the weight of the tumor is noted there were,

5 lbs. or less.....	28 cases;
Between 5 and 10 lbs.....	15 "
"    10 "    20 "    .....	57 "
"    20 "    30 "    .....	23 "
"    30 "    40 "    .....	9 "
"    40 "    50 "    .....	12 "
"    50 "    60 "    .....	6 "
"    60 "    111½ "    .....	5 "

Average weight, 21½ lbs.

## NUMBER OF OVARIES REMOVED.

	NO. CASES.	NO. DEATHS.	MORTALITY.
One ovary removed,	128	15	11.7 per cent.
Both ovaries removed,	65	9	13.8 "
Number removed not stated in 14 cases.			

## ADHESIONS.

Of 200 cases in which the matter of adhesions is noted,

In 79 there were no adhesions; of these there were 6 deaths, a mortality of 7.6 per cent.

In 38 there were slight or moderate adhesions; of these there were 3 deaths, a mortality of 7.9 per cent.

In 83 there were extensive, universal, intestinal or pelvic adhesions; of these, 15 died, a mortality of 18 per cent.

## TREATMENT OF PEDICLE.

Tied and dropped.....	192 cases.
"    "    sewed into wound.....	1 "
Clamped.....	2 "
No pedicle.....	7 "
Treatment not specified.....	5 "

## DRAINAGE.

Drained .....	45
Not drained.....	145
Drainage not noted.....	17

## PLACE OF OPERATION.

	NO. CASES.	NO. DEATHS.	MORTALITY.
Private Hospital,	101	12	11.9 per cent.
Hospital,	46	7	15.2 "
Private,	60	8	13.3 "
Total.....	207	27	13. "

## REMARKS.

Peritonitis existed at time of operation in 6 patients, of whom 1 died.

Septicæmia was present in 1 case which recovered.

Abscess communicating with intestine complicated 1 case, which was fatal.

Suppurating cysts numbered 7, with 5 deaths.

Rupture of cyst prior to operation had taken place in 8 cases; of these 2 died.

Twisted pedicle existed in 5 cases; 1 died.

The tumor was intraligamentous in 5 cases; 2 died.

Tumors were enucleated in 2 cases; 1 died.

Inseparable tumors were stitched to external wound and drained in 5 cases; 1 died.

Part only of the tumor was removed in 2 cases; both recovered.

One incomplete operation proved fatal.

Suture of uterus to abdominal wall for procidentia (in addition to ovariectomy) was successfully practiced in 1 case.

In 2 cases labor had preceded the operation by 5 and 7 weeks respectively; both recovered.

In 1 case premature labor at 7 months had been induced 5 weeks before operation; both mother and child survived.

In 1 case abortion followed 10 days after operation; the woman recovered.

In 1 case labor at 8 months occurred on the 7th day after operation; the patient died.

In 2 cases, pregnant respectively 4 and 5 months, gestation was not interrupted.

In 2 cases the abdomen was reopened, in one to check hemorrhage from pedicle, in the other on account of suspected suppuration; both died.



## CAUSE OF DEATH.

Of the 27 fatal cases, the cause of death is reported in 18, as follows; Shock, 2; tetanus 2; peritonitis, 1; hemorrhage, 2; exhaustion, 3; intestinal obstruction, 2; septicæmia, 5; capillary bronchitis, 1.

## LAPAROTOMIES FOR REMOVAL OF OVARIES NOT THE SEAT OF TUMOR.

AGE.		
Between 17 and 25 years.....	37	
“ 26 “ 35 “ .....	61	
“ 36 “ 40 “ .....	10	
“ 41 “ 50 “ .....	5	
Age not stated in .....	2	

## SOCIAL CONDITION.

Single (of these 3 had borne children).....	45
Married.....	62
Widows.....	4
Social condition not stated in.....	4

## NUMBER OF CHILDREN.

Single women who had borne no children .....	18
Married “ “ “ “ “ .....	16
Women “ “ “ 1 child .....	19
“ “ “ “ 2 children .....	6
“ “ “ “ 3 “ .....	3
“ “ “ “ more than 3 child'n .....	5
Number of children not stated in.....	48

## PATHOLOGICAL CONDITIONS AND SYMPTOMS.

Pathological condition alone is stated in....	67 cases.
Symptoms necessitating operation alone are stated in.....	8 “
Both pathological condition and symptoms stated in.....	40 “

In many cases, of course, a number of pathological conditions and symptoms co-exist in the same case.

## PATHOLOGICAL CONDITIONS STATED.

Dislocation of a single ovary.....	3 cases.
“ “ both ovaries .....	9 “
“ “ “ (one or both not stated) .....	1 “
One ovary adherent.....	1 “
Both ovaries “ .....	4 “
Atrophy of a single ovary.....	1 “
Single ovaritis .....	4 “
Double “ .....	8 “
Ovaritis (single or double not stated).....	23 “
Cirrhosis of a single ovary .....	1 “
“ “ both ovaries.....	2 “
“ “ “ (one or both not stated) .....	2 “
One ovary cystic .....	2 “
Both ovaries cystic .....	21 “

Hæmatoma of ovary.....	1 “
Abscess of a single ovary .....	10 “
“ “ both ovaries .....	3 “
Small fibromata on ovaries.....	1 “
Single salpingitis.....	3 “
Double “ .....	3 “
Salpingitis (single or double not stated).....	10 “
Both tubes cystic.....	5 “
Single hæmatosalpinx.....	1 “
Single pyosalpinx .....	8 “
Double “ .....	9 “
Pyosalpinx (single or double not stated).....	13 “
Occlusion of one tube.....	2 “
“ “ both tubes .....	8 “
Congenital defect of ovaries and tubes.....	1 “
Retroflexion of uterus with repeated pelvic inflammations.....	1 “
Uterine fibroma.....	7 “

## COMPLICATIONS.

Pelvic peritonitis in.....	3 cases.
“ abscess in.....	2 “
Parovarian cyst in.....	2 “

## SYMPTOMS STATED.

Hystero-epilepsy .....	11 cases.
Mental aberration.....	4 “
Dysmenorrhœa.....	6 “
Uterine hemorrhage .....	4 “
Pain .....	31 “
Confirmed invalidism.....	13 “

## NUMBER OF OVARIES REMOVED.

Single ovary removed in.....	23 cases.
Both ovaries “ “ .....	92 “

## ADHESIONS.

Adhesions existed in.....	78 cases.
“ were absent in .....	18 “
“ “ not noted in.....	19 “

## TREATMENT OF PEDICLE.

Tied and dropped in.....	106 cases.
Abscess sac sewed into wound in.....	1 “
Treatment not noted in .....	8 “

## DRAINAGE.

Drained .....	35 cases.
Not drained.....	64 “
Drainage not noted.....	16 “

## PLACE OF OPERATION.

Hospital.....	45 cases
Private Hospital.....	26 “
Private.....	44 “

## MORTALITY LIST.

Of these 115 cases, 10 died—a mortality of 8.7 per cent.

1. Death in 2 hours from shock of operation done during acute peritonitis following rupture of ovarian abscess.

2. Death on 7th day from rupture of secondary omental abscess, the wall of an ovarian abscess having been sewed into wound.

3. Death from sepsis following extirpation of ovarian abscess which burst during removal.

4. Death from pyosalpinx operation done during peritonitis on 11th day of puerperium.

5. Death from pyosalpinx operation done during acute peritonitis and intestinal obstruction.

6. Death from pyosalpinx operation—cause not stated.

7. Death from uræmia after removal of ovaries and tubes for mental aberration.

8. Death from syncope after removal of cystic and cirrhotic ovaries.

9. Death from double pneumonia after removal of cystic ovaries.

10. Death after removal of ovaries for hystero-epilepsy.

EFFECT OF OPERATION UPON THE CONDITION  
REQUIRING IT.*Operations for removal of ovaries or tubes the subject of inflammatory disease.*

Cure.....	44 cases.
Complete relief.....	3 “
Improved.....	12 “
Doubtful.....	1 “
Not stated.....	3 “
Total.....	63 “

*Operations for removal of cystic ovaries with accompanying symptoms.*

Cure.....	3 cases.
Improved.....	4 “
Not stated.....	2 “
Total.....	9 “

*Operations for removal of cystic tubes with attendant symptoms.*

Cure.....	3 cases.
Improved.....	1 “
Total.....	4 “

*Operations for adherent ovaries and tubes.*

Cure.....	2 cases.
Temporary relief only.....	1 “
Total.....	3 “

*Operation for hæmatosalpinx.*

Cure.....	1 case.
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*Operations for hemorrhage from uterine fibroma.*

Cure.....	1 case.
Improved.....	2 “
No definite result yet.....	1 “
Total.....	4 “

*Operations for pain from uterine fibroma.*

Cure.....	1 case.
Some improvement.....	1 “
Total.....	2 “

*Operation for dysmenorrhœa.*

Cure.....	1 case.
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*Operations for dysmenorrhœa with convulsions.*

Cure.....	1 case.
Improved.....	2 “
No permanent effect.....	1 “
Total.....	4 “

*Operations for hystero-epilepsy.*

Cure.....	3 cases.
Relieved so far.....	1 “
Much improved.....	1 “
Pain cured, but convulsions continue.....	1 “
Total.....	6 “

*Operations for ovarian insanity.*

Encouraging.....	1 case.
Temporary effect.....	1 “
Total.....	2 “

*Operation for menstrual insanity.*

Cure.....	1 case.
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*Operations for ovarian neuralgia.*

Cure.....	1 case.
Great relief.....	1 “
Total.....	2 “

*Operation for retroflexion with repeated pelvic inflammations.*

Cure.....	1 case.
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*Operation for chronic invalidism with pelvic pain.*

Improved.....	1 case.
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*Operation for congenital defect of ovary and tubes.*

Cure.....	1 case.
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## REMARKS.

Tubes were removed with the ovaries in 88 cases.  
In 4 cases both ovaries and tubes were removed,  
and menstruation continued.  
Gonorrheal history was noted in 2 cases.



### LAPAROTOMIES FOR OTHER PURPOSES THAN REMOVAL OF OVARIES.

CLASSIFICATION.

	NO. CASES.
1. Exploratory incisions.....	31
2. Sections for drainage.....	8
3. Sections for evacuation of abscesses.....	10
4. Sections for evacuation of blood-collections..	4
5. Section for drainage of cyst.....	1
6. Sections for release of adhesions.....	2
7. Sections for relief of intestinal obstruction..	12
8. Gastrotomy.....	2
9. Sections for partial or entire removal of tumors other than ovarian.....	6
10. Section for extra-uterine foetation.....	1
11. Hysterectomy.....	8
12. Nephrectomy.....	1
13. Splenectomy.....	1
14. Sections for traumatism.....	8
15. Section for repair of vermiform appendix..	1
16. Cholecystotomy.....	1
17. Sections for radical cure of hernia not strangulated.....	3

The *exploratory incisions* were for the following causes :

Ovaries and tubes the subject of inflammatory disease and too adherent for removal.....	3 cases.
Chronic pelvic peritonitis.....	1 "
Suppurative peritonitis.....	1 "
Tumors of omentum.....	3 "
Tumor of spleen.....	1 "
Adherent uterine fibro-cyst.....	1 "
Adherent uterine fibroids.....	4 "
Cancer of stomach.....	1 "
Cancer of ovary surrounding rectum.....	1 "
Cancer of peritoneum.....	1 "
Sarcoma of liver.....	1 "
Sarcoma of kidney.....	1 "
Sarcoma of ovary (adherent).....	1 "
Sarcoma—Retroperitoneal.....	1 "
Papilloma of uterus and ovary.....	1 "
Cyst of kidney.....	1 "
Encysted peritoneal dropsy.....	1 "
Ascites from malignant disease.....	1 "
Ascites from unknown cause.....	1 "
Tubercular peritonitis.....	3 "
Perforating gall-stone (irremovable).....	1 "
Fæcal fistula.....	1 "

The *sections for drainage* were all for peritonitis ; 1 puerperal ; 5 tubercular ; 1 acute septic from bursting pyosalpinx ; 1, nature not stated.

The sections for the evacuation of abscesses were for the following: 6 pelvic; 1 perityphlitic; 1 hepatic; 1 perivesical; 1 suppurating cyst of urachus.

The sections for evacuation of blood-collections were : 3 for intra-peritoneal hæmatocele and 1 for hæmatoma of broad ligament.

The sections for relief of intestinal obstruction were : 4 for external strangulated hernia ; 5 for constricting bands ; 1 for adhesion to abdominal wall ; and 2 for volvulus.

Of the *gastrotomies*, one was for the extraction of a foreign body, the other for the formation of a fistula.

Of the sections for entire or partial removal of tumors, 4 were for uterine fibroids, 1 for cancer of omentum, and 1 for cyst of mesentery.

Of the sections for traumatism, 4 were for shot wounds, 3 for stab wounds and 1 for ruptured bladder.

## RESULTS.

	Cured.	Improved.	No effect.	Died.	Total.
Exploratory incisions .....	2	5	20	4	31
Section for peritonitis .....	1	.....	.....	.....	1
" " puerperal peritonitis .....	.....	1	1	.....	2
" " tubercular .....	*1	3	.....	1	5
" " septic .....	.....	.....	1	.....	1
" " evacuation of abscess .....	9	.....	1	.....	10
" " blood-collection .....	3	.....	1	4	8
" " drainage of cyst .....	.....	1	.....	.....	1
" " release of adhesions .....	.....	1	1	.....	2
" " relief of intestinal obstruction .....	3	.....	.....	7	10
" " "strangulated hernia .....	2	.....	.....	.....	2
" " gastrotomy for foreign body .....	1	.....	.....	.....	1
" " formation of gastric fistula .....	.....	.....	.....	.....	.....
" " entire or partial removal of tumors .....	1	2	.....	3	6
" " ruptured tubal pregnancy .....	1	.....	.....	.....	1
Hysterectomy .....	2	.....	6	.....	8
Nephrectomy .....	.....	.....	1	.....	1
Splenectomy .....	1	.....	.....	.....	1
Sections for stab without injury to viscera .....	2	.....	.....	.....	2
" " of liver .....	.....	.....	.....	1	1
" " shot wound of liver .....	1	.....	.....	.....	1
" " "intestine .....	.....	.....	3	.....	3
" " ruptured bladder .....	.....	.....	.....	1	1
" " ligation of vermiform appendix .....	.....	.....	1	.....	1
Cholecystotomy .....	1	.....	.....	.....	1
Sections for rad. cure of hernia not strangulated .....	3	.....	.....	.....	3
Total .....	34	13	22	31	100

\*Another case of cure of tubercular peritonitis is tabulated above as a cure by exploratory incision, as no drainage was used.

Of the entire number of laparotomies here recorded, 177 had been reported before, 126 had not before been reported, and in 119 cases this question was unanswered.

# OPERATORS:

	NO. CASES REPORTED.
Dr. Washington Akin.....	1
" W. F. Atlee.....	4
" J. M. Baldy.....	7
" Robert Battey.....	2
" Henry Beates, Jr.....	6
" R. B. Bontecou.....	1
" J. D. Bryant.....	1
" J. J. Buchanan.....	2
" N. B. Carson.....	7
" D. W. Cheever.....	3
" N. P. Dandridge.....	1
" Joseph Eastman.....	18
" William Goodell.....	29
" S. W. Gross.....	4
" Virgil O. Hardon.....	2
" Neil Hardy.....	1
" J. W. Heddens.....	3
" Hampton E. Hill.....	8
" H. O. Hitchcock.....	5
" John Homans.....	33
" Edward J. Ill.....	17
" A. Reeves Jackson.....	3
" C. A. Jersey.....	2
" Joseph Taber Johnson.....	12
" A. W. Johnstone.....	9
" Mary A. Dixon-Jones.....	12

	NO. CASES REPORTED.
Dr. R. A. Kinloch.....	5
" Daniel Longaker.....	3
" Matthew D. Mann.....	15
" A. S. von Mansfelde.....	2
" Henry O. Marcy.....	4
" R. B. Maury.....	8
" T. J. Maxwell.....	3
" E. E. Montgomery.....	10
" Robert T. Morris.....	3
" Paul F. Munde.....	26
" W. H. Myers.....	6
" L. S. McMurtry.....	2
" F. K. Owen.....	1
" M. Price.....	3
" David Prince.....	7
" John C. Reeve.....	3
" M. H. Richardson.....	10
" R. S. Sutton.....	20
" L. McLane Tiffany.....	5
" A. Vander Veer.....	22
" J. R. Weist.....	6
" X. O. Werder.....	2
" William C. Wile.....	6
" Elwood Wilson.....	1
" W. Gill Wylie.....	56



## STATISTICAL TABLES.—OVARICTOMY.

These reports are invariably secured directly from the operator, and they include all of his ovariectomy cases within the period covered by his report.

No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	No. Tappings.	Time since first noticed.	Size and Nature of Tumor.	One or both Ovaries?	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death).	Remarks.	Reported Elsewhere?
1	Dr. John Homans, Boston, Mass....	Jan. 9, '86.	38	W	2	2	12 yrs.	48 lbs. Cyst of rt. broad lig. 8½ lbs. Round cell sarcoma of l. ovary with ascites.	One.	None.	Tied and burnt.	None.	H	R	Nos. 1 to 33, inclusive. Antiseptic, with Carbolic Spray. Patient feeble before operation. Death on 9th day.	
2	"	Jan. 14, '86.	21	S	0	0	4 mos.	86 lbs. Multiloc. cyst of r. ovary.	"	"	"	"	H	D		
3	"	Jan. 16, '86.	51	M	2	0	3 yrs.	40½ lbs. Multiloc. cyst of l. ovary.	"	Universal parietal.	"	"	H	R		
4	"	Jan. 19, '86.	33	M	1	1	2 yrs.	4½ lbs. Multiloc. cyst of r. ovary.	"	"	"	"	H	R		
5	"	Jan. 27, '86.	35	M	4	4	2 yrs.	4½ lbs. Multiloc. cyst of r. ovary.	"	and intestinal.	"	"	H	R		
6	"	Jan. 28, '86.	52	M	0	1	1 week.	L. ovary gangrenous, with twisted pedicle. R. ovary ½ lb. L. ovary ½ lb. Papillomatous with ascites. Multiloc., rotten, friable, adherent cyst of l. ovary.	"	Slight, recent, intestinal.	"	"	H	D	In articulo mortis when operated upon, and probably had not one chance in a million of recovering.	
7	"	Feb. 1, '86.	26	M	1	1	2 yrs.	Multiloc., rotten, friable, adherent cyst of l. ovary.	Both.	Pelvic.	"	Yes.	H	R	Desperate case.	
8	"	Feb. 8, '86.	49	W	0	1	6 mos.	Multiloc. cyst of r. ovary.	One.	Intestinal.	"	None.	H	R	Peritonitis at time of operation.	
9	"	Feb. 13, '86.	19	S	0	0	10 mos.	15 lbs. Multiloc. cyst of r. ovary.	"	None.	"	"	H	R	Ascites present. Largely fluid; cyst 7 lbs.; fluid 8 lbs.	
10	"	Feb. 15, '86.	48	M	2	1	7 mos.	14½ lbs. Papillomatous r. ovary.	"	General.	"	"	H	R		
11	"	Feb. 16, '86.	53	M	4	0	6 mos.	28½ lbs. Multiloc. cyst of r. ovary.	"	None.	"	"	H	R		
12	"	Mar. 4, '86.	24	M	0	0	11 mos.	45 lbs. Multiloc. cyst of r. ovary, with ascites.	"	"	"	"	H	R		
13	"	Mar. 30, '86.	25	S	0	0	4 yrs.	22 lbs. Multiloc. cyst of r. ovary.	"	"	"	"	H	R		
14	"	Apr. 1, '86.	36	M	0	0	2 weeks.	Multiloc. cyst of r. ovary.	"	"	"	"	H	R		

STATISTICAL TABLES.—OVARIOCTOMY. (Continued.)

No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	No. of Tappings.	Time since first noticed.	Size and Nature of Tumor.	One or both Ovaries?	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death.)	Remarks.	Reported Elsewhere:
15	Dr. John Homans. (Continued).....	Apr. 1, '86.	35	M	2	0	6 mos.	* Multiloc. cyst of r. ovary, with twisted pedicle. Both ovaries papillomatous; 5 lbs. and 2½ lbs. Ascites.	One.	None. Universal peritoneal and intestinal.	Tied and burnt.	None.	H	R	Pedicle twisted, vessels plugged, tumor gangrenous. A long, difficult operation. Death on 7th day. A piece of omental tumor also removed.	
16	"	Apr. 29, '86.	45	S	0	0	1 yr.	3 lbs. and 10½ lbs. Ascites. Dermoid cyst of r. ovary.	Both.	Yes.	"	"	H	D	"	
17	"	Apr. 22, '86.	42	M	5	0	1 week.	13 lbs. Multiloc cyst of l. ovary and right. 12½ lbs. Multiloc. cyst of l. ovary.	One.	Intestinal.	"	"	H	R	"	
18	"	May 22, '86.	41	S	0	0	4 yrs.	13 lbs. Multiloc cyst of l. ovary and right. 12½ lbs. Multiloc. cyst of l. ovary.	Both.	"	"	Yes.	P	R	Cyst inseparable; completely drawn up, sutured and drained.	
19	"	May 25, '86.	41	M	0	0	Unknown.	Multiloc. cyst, of which ovary is unknown.	One.	None.	"	None.	H	R	Cyst wall in one place 2 in. thick. Treated like Case 19.	
20	"	June 3, '86.	26	M	1	0	7 mos.	Uniloc. cyst of r. ovary. 13½ lbs.	"	Inseparable.	(None.)	Yes.	H	R	Confined 7 weeks before and tapped twice since confinement.	
21	"	June 3, '86.	34	W	0	0	4 mos.	14 lbs. Multiloc. cyst of r. ovary. 3 oz.	Both.	None.	Tied and burnt.	None.	H	R	Confined 5 weeks before.	
22	"	June 7, '86.	37	M	2	0	3 weeks.	Multiloc. cyst of r. ovary. 13½ lbs.	One.	To every adjacent part.	"	"	H	R	"	
23	"	June 8, '86.	23	M	2	4	1 yr.	Multiloc. cyst of l. ovary.	One.	Yes.	"	"	H	R	"	
24	"	June 10, '86.	22	M	2	1	9 mos.	Multiloc. cyst of r. ovary.	"	"	"	Yes.	H	R	"	
25	"	July 6, '86.	43	M	10	0	8 mos.	Multiloc. cyst of r. ovary, with twisted pedicle.	"	None.	"	"	H	R	"	
26	"	July 8, '86.	44	S	0	0	5 mos.	25 lbs. L. ovary.	"	"	"	"	H	R	"	
27	"	July 9, '86.	55	W	0	0	3 yrs.	12 lbs. L. ovary.	"	"	"	"	H	R	"	
28	"	July 27, '86.	34	S	0	0	15 mos.	13 lbs. R. ovary.	"	"	"	"	H	R	"	
29	"	Sept. 4, '86.	23	S	0	0	3 mos.	Both 14 lbs. 11½ lbs. L. ovary. 1 lb. ovary. (?)	Both.	Yes.	"	"	H	R	"	
30	"	Oct. 9, '86.	48	M	2	0	8 mos.	11½ lbs. L. ovary.	One.	"	"	"	H	R	"	
31	"	Oct. 16, '86.	60	S	0	0	25 yrs.	1 lb. ovary. (?)	"	None.	"	"	H	R	"	
32	"	Nov. 10, '86.	36(?)	S	0	0	1 yr.	L. ovary.	"	"	"	"	H	R	"	
33	"	Nov. 20, '86.	21	S	0	0	6 mos.	"	"	"	"	"	H	R	"	



STATISTICAL TABLES.—OVARICTOMY. (Continued.)

No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	No. of Tappings.	Time since first noticed.	Size and Nature of Tumor.	One or both Ovaries?	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death)	Remarks.	Reported Elsewhere.
34 35	Dr. A. Reeves Jackson, Chicago, Ill. "	Jan. 3, '86. Feb. 25, '86.	24 35	S M	0 2	0 0	6 mos. 9 mos.	16 lbs. Multiloc. 8 lbs. Dermoid.	One.	None.	Tied & dropped.	None.	P P	R R		
36 37	Dr. M. D. Mann, Buffalo, N. Y. "	Jan. 11, '86. Feb. 10, '86.	16 29	S M	0 1	0 0	15 mos. 4 mos.	12 lbs. Multiloc. 7 lbs.	"	"	Tied & burnt off.	"	H H	R R	Undoubted fibroid. Much ascites. Died four weeks later of intestinal obstruction, from adhesion to pedicle.	
38	"	Feb. 18, '86.	54	M	10	0	3 yrs.	5 lbs. Solid fibroid.	"	"	"	"	H	R		
39	"	Feb. 25, '86.	48	M	9	0	8 mos.	15 lbs. Multiloc.	"	Slight.	"	"	H	R(?)		
40	"	Mar. 25, '86.	56	M	6	0	4 yrs.	40 lbs.	"	Very extensive and firm.	"	"	H	R		
41	"	Apr. 28, '86.	18	M	0	0	3 yrs.	12 lbs.	"	Slight.	"	"	H	R		
42	"	May 5, '86.	34	M	0	0	18 mos.	1/2 lb. Thin cyst. Filled blood.	"	Firm pelvic.	"	"	H	R		
43	"	May 19, '86.	59	S	0	0	18 mos.	20 lbs. Cyst of broad lig.	"	None.	"	"	H	R		
44	"	June 2, '86.	37	S	0	0	6 yrs.	29 lbs. Cyst of broad lig.	"	"	"	"	H	R		
45	"	June 12, '86.	28	M	1	0	4 mos.	10 lbs. Monocyst.	"	"	"	"	H	R		
46	"	June 18, '86.	56	M	6	0	8 yrs.	20 lbs. Double cyst.	"	"	"	"	P	R		
47	"	Sept. 27, '86.	57	S	0	0	16 mos.	8 lbs. Monocyst.	"	"	"	"	H	R		
48	"	Sept. 28, '86.	53	W	13	0	9 mos.	13 lbs. Multiloc.	"	"	"	"	H	R		
49	"	Oct. 14, '86.	57	S	0	1	3 yrs.	30 lbs.	"	"	"	"	H	R		
50	"	Oct. 28, '86.	21	S	0	1	6 mos.	"	"	"	"	"	H	R		
51	Dr. Edward J. Ill. Newark, N. J.	Feb. 27, '86.	39	S	0	0	18 yrs.	54 lbs. Uniloc. of r. ovary. 73 lbs. Multiloc. of r. ovary. L. ovary cystic.	"	"	Double Lig.	"	H	R		
52	"	Nov. 15, '86.	59	S	0	0	14 yrs.	"	Both.	"	"	"	H	R		

## STATISTICAL TABLES.—OVARIOTOMY.

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No.	Operator	Date of Operation.	Age.	Married or Single.	No. of Children.	No. Tappings.	Time since first noticed.	Size and Nature of Tumor.	One or Both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death.)	Remarks.	Reported Elsewhere.
53	Dr. Henry O. Marcy, Boston, Mass...	Aug. 1, '86.	27	S	.....	.....	6 mos.	30 lbs. Comp. cyst. R. ovary large; L. small.	Both.	None.	Tendon Suture; Marcy shoemaker's stitch.	None.	PH	R	Multiple cysts, very small and firm.	No.
54	"	Sept. 22, '86.	32	M	0	.....	2 yrs.	13 lbs. Single cyst R. ovary.	One.	"	"	"	PH	R	Cyst wall very thick.	"
55	"	Oct. 23, '86.	32	M	0	.....	4 yrs.	8 lbs. Single dermoid cyst of ovary.	"	"	"	"	PH	R	Bony plate in cyst wall 2x3 in.	"
56	"	Nov. 11, '86.	26	S	0	.....	1 yr.	23 lbs., R. ovary. L. size of egg.	Both.	"	"	"	PH	R	Both tubes diseased and removed.	"
57	Dr. Robert Battey, Rome, Ga.....	Mar. 1, '86.	43	M	1	0	9 yrs.	Both dermoid.	"	Pelvic.	Ligated.	Yes.	PH	R	Complete anti-sepsis, with carbolic spray. Rec'd at same time a pediculated sarcoma of uterus.	Trans. Ga. State Med. Assoc'n, '86.
58	"	Mar. 30, '86.	31	S	0	0	2 yrs.	22 lbs. Uniloc. cyst of R. ovary. L. ovary cystic.	"	None.	"	None.	PH	R	Rec'd at same time a pediculated sarcoma of uterus.	No.
59	Dr. R. B. Maury, Memphis, Tenn....	Jan. 7, '86.	46	M	7	7	2½ yrs.	60 lbs. Multiloc. cyst. Much solid matter.	One.	Extensive.	"	Yes.	P	R		"
60	"	Sept. 10, '86.	25	M	1	2	22 mos.	58 lbs. Polycyst of R. ovary.	Both.	"	"	"	P	R		"
61	"	Oct. 28, '86.	32	M	3	0	1 yr.	30 lbs. Mostly solid.	One.	"	"	"	P	R	Extensive peritonitis for months before operation.	"
62	"	Nov. 12, '86.	35	M	0	0	15 yrs.	20 lbs. Simple monocyst.	"	None.	"	None.	P	R		"
63	Dr. A. Reeves Jackson, Chicago, Ill..	Nov. 3, '86.	39	M	3	1	4 yrs.	3 lbs. Ovarian cyst.	"	Adherent to every part.	Tied and dropped.	"	P	R		"
64	Dr. Neal Hardy, U. Sandusky, O.....	Oct. 12, '86.	43	M	3	1	2 yrs.	25 lbs. Multiloc.	"	Slight.	Ligated in sections and ret'd.	"	P	R		"



STATISTICAL TABLES.—OVARIOCTOMY. (Continued.)

No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	No. Tappings.	Time since first noticed.	Size and Nature of Tumor.	One or both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death.)	Remarks.	Reported Elsewhere.
65	Dr. Jos. Taber Johnson, Wash. D. C.	Apr. 21, '86.	31	M	0	0	2 yrs.	15 lbs. Parovarian cyst.	One.	None.	Ligated silk and dropped.	None.	P	R		<i>Va. Med. Mon'y, Dec. 1886.</i>
66	"	May 7, '86.	42	M	3	0	1 yr.	20 lbs. Round cell sarcoma.	Both.	Few.	"	"	H	R		"
67	"	Oct. 23, '86.	31	S	0	0	3 mos.	12 lbs. Parovarian cyst.	One.	None.	"	"	H	R		"
68	"	Nov. 11, '86.	48	M	5	0	1 yr.	15 lbs. Round cell sarcoma.	"	Universal.	"	Yes.	H	R		"
69	Dr. L. S. McMurtry, Danville, Ky.	June 24, '86.	27	M	2	0	8 mos.	Large monovcyst.	"	Extensive parietal and omental. Universal to abdominal wall, bladder, and intestines.	Silk Ligature.	None.	P	R		<i>Med. Her. Aug. 1886.</i>
70	"	Nov. 18, '86.	31	M	4	2	2½ yrs.	Large polycyst.	"		"	Yes.	P	R		
71	Dr. Wm. C. Wile, Newtown, Conn....	Jan. 11, '86.	63	M	0	0	2 yrs.	12 lbs. Simple cyst of r. ovary.	One.	Mural.	Tied iron-dyed silk and dropped.	None.	P	D	Extensive adhesions. All the viscosity melted together.	Conn. St. Med. Soc'y. N. E. Med. Monthly. No.
72	"	Feb. 12, '86.	49	M	0	0	11 mos.	42 lbs. L. ovary.	"	None.	"	"	P	R		"
73	"	Mar. 18, '86.	37	S	0	0	26 mos.	47 lbs. Double cyst.	Both.	Abundant; almost every white.	"	Yes.	P	D	Double Suppurating cysts.	"
74	"	Mar. 20, '86.	52	M	8	0	9 mos.	39 lbs. L. ovary.	One.	Moderate.	"	None.	P	R		"
75	"	Mar. 28, '86.	41	M	3	2	1 yr.	27 lbs. R. ovary.	"	"	"	"	P	R		"
76	"	May 10, '86.	53	S	0	0	11 mos.	19 lbs. R. ovary.	"	"	"	"	P	R		"

STATISTICAL TABLES.—OVARIOCTOMY. (Continued.)

No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	No. of Tappings.	Time since first noticed.	Size and Nature of Tumor.	One or both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death)	Remarks.	Reported Elsewhere.
77	Dr. Elwood Wilson, Philad'a, Pa.....	Oct. 10, '86.	37	S	0	0	2 yrs.	Cyst size of goose egg.	Both.	Few.	Dropped.	None.	H	R	Simple case.	No.
78	Dr. David Prince, Jacksonville, Ill..	Feb. 3, '86.	50	W	0	0	8 mos.	Large multiloc.	One.	None.	Cat-gut Ligat're.	"	PH	D	Abscesses; one communicating with intestinal canal.	<i>Am. Practitioner</i> , Apr. 3 & 17, '86.
79	"	Feb. 25, '86.	26	M	3	0	5 yrs.	43 lbs. Multiloc.	"	Extensive.	"	"	PH	R	Abortion ten days after operation.	"
80	"	May 13, '86.	20	M	1	0	1 yr.	Medium Multiloc.	"	Several.	"	"	PH	R	"	"
81	"	June 2, '86.	47	M	0	.....	2 yrs.	Cancer.	"	Extensive.	(None.)	"	PH	D	No distinct pedicle.	No.
82	"	Aug. 5, '86.	38	M	0	4 (?)	2 yrs.	"	"	"	"	"	PH	D	"	"
83	"	Aug. 19, '86.	37	M	8	1	9 mos.	Large Multiloc.	"	Recent, extensive.	Cat gut Ligat.	"	PH	R	Prostrated, but made a good recovery.	"
84	"	Nov. 11, '86.	29	S	0	0	1 yr.	Multiloc.	"	None.	"	"	PH	D	Obstruction in small intestine.	"
85	Dr. R. S. Sutton, Pittsburg, Pa.....	Nov. 20, '86.	.....	M	2	0	.....	Large parovarian cyst and cystic ovary on l. side. R. ovary cystic.	Both.	"	Tied and cut off.	"	PH	R	Two inch incision. Operation complete in 30 minutes. No carbolic or other chemical used in water or over instruments.	<i>Med. and Surg. Rep.</i> , Jan. 1, '87.
86	Dr. J. R. Weist, Richmond, Ind.....	Jan. 7, '86.	37	W	3	0	2 yrs.	15 lbs. Dermoid.	One.	Moderate.	Silk. Cut short.	"	H	R	"	No.
87	Dr. J. J. Buchanan, Pittsburgh, Pa..	Oct. 23, '86.	27	M	3	0	4 yrs.	15 lbs. Multiloc.	"	Extensive omental.	Tied silk and dropped.	"	P	R	"	"



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88	Dr. Wm. Goodell, Philadelphia, Pa.	Jan. 10, '86.	20	S	0	1	.....	15 lbs. Colloid cyst of r. ovary.	One.	Pelvic.	Tied with silk.	None.	PH	R		<i>Med. News</i> , Jan. 24, '87.
89	"	Jan. 24, '86.	36	M	5	0	.....	58 lbs. R. ovary.	Both.	Universal.	"	"	PH	R	Long and tedious operation. Many ligatures.	"
90	"	Jan. 25, '86.	21	S	0	0	.....	3 lbs. Parovarian cyst of l. side.	One.	None.	"	"	PH	R		"
91	"	Jan. 31, '86.	23	S	0	0	.....	10 lbs. R. ovary.	"	"	"	"	PH	R		"
92	"	Feb. 7, '86.	54	M	0	0	.....	20 lbs. Malignant colloid cyst of r. ovary.	"	Omental.	"	"	H	R	Cyst had burst, infecting all abdominal organs.	"
93	"	Feb. 14, '86.	48	M	2	0	.....	5 lbs. R. ovary.	Both.	None.	"	"	PH	R		"
94	"	Mar. 7, '86.	57	M	5	0	.....	10 lbs. Parovarian cyst, r. side.	"	"	"	"	PH	R		"
95	"	Mar. 9, '86.	36	M	3	0	.....	2 lbs. R. ovary.	"	"	"	"	H	R	Bedridden for nine months.	"
96	"	Mar. 21, '86.	49		1	6	.....	49 lbs. Cyst of l. ovary. One pound dermoid of r. ovary.	"	"	"	"	PH	R		"
97	"	Apr. 25, '86.	45	M	2	1	.....	20 lbs. R. ovary.	One.	Omental, parietal and intestinal.	"	"	PH	R	Multiple fibroids of womb.	"
98	"	May 9, '86.	42	W	0	0	.....	2 lbs. L. ovary.	Both.	Pelvic.	"	"	PH	R	<i>Appendix vermiformis</i> dissected off cyst.	"
99	"	May 16, '86.	60	W	8	0	.....	20 lbs. L. ovary.	One.	Parietal, omental and intestinal.	"	"	PH	R		"
100	"	May 16, '86.	39	S	0	0	.....	15 lbs. L. ovary; 1 lb. cyst of r. ovary.	Both.	Pelvic, parietal.	"	"	PH	R	Left ovary removed on account of multiple fibroids of womb.	"
101	"	May 25, '86.	38	S	0	3	.....	30 lbs. Cyst of r. ovary.	"	Parietal and omental.	"	"	P	R		"
102	"	June 13, '86.	31	S	0	0	.....	1 lb. L. ovary.	"	Pelvic.	"	"	PH	R		"

STATISTICAL TABLES.—OVARIOCTOMY. (Continued.)

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103	Dr. Wm. Goodell, Philadelphia, Pa.	June 17, '86.	23	M	0	0	.....	10 lbs. Cyst of r. ovary. 1 lb. of l. ovary.	Both.	Pelvic, omental and intestinal.	Tied with silk.	None.	F H	R	R. ovary full of hair.	<i>Med. News</i> , Jan. 29, '87.
104	"	June 17, '86.	35	S	0	0	.....	5 lbs. Dermoid of r. ovary. $\frac{3}{4}$ lb. l. ovary.	"	Pelvic, omental and intestinal.	"	"	P H	R	Died on table.	"
105	"	June 22, '86.	43	M	0	0	.....	84 lbs. Intra-ligamentous cyst.	"	Universal.	"	Y s.	P H	D		"
106	"	July 6, '86.	39	M	4	0	.....	15 lbs. Intra-ligamentous cyst of l. ovary.	One.	Pelvic.	"	None.	P H	R		"
107	"	July 31, '86.	45	M	0	1	.....	50 lbs. Malignant colloid cyst of l. ovary.	Both.	None.	"	"	P	R	Cyst had burst, infecting every abdominal organ.	"
108	"	Sept. 14, '86.	74	.....	0	1	.....	29 lbs. L. ovary.	"	"	None.	"	P H	R		"
109	"	Sept. 24, '86.	18	.....	0	0	.....	25 lbs. R. ovary. 1 lb. l. ovary. Colloid intra-ligamentous cysts.	"	Universal.	"	"	P H	R	Large cyst enucleated without a pedicle.	"
110	"	Sept. 24, '86.	36	S	0	0	.....	1 lb. L. ovary.	"	Pelvic.	Tied with silk.	"	P H	R		"
111	"	Sept. 28, '86.	32	M	2	0	.....	48 lbs. R. ovary.	"	Parietal.	"	"	P H	R		"
112	"	Oct. 10, '86.	28	M	0	0	.....	2 lbs. R. ovary.	"	Intestinal, uterine and to broad ligament.	"	"	P H	R		"
113	"	Nov. 6, '86.	44	M	2	0	.....	20 lbs. R. ovary. 2 lbs. L. ovary. Malignant cysts.	"	Omental.	"	"	P	R		"
114	"	Nov. 21, '86.	37	S	0	0	.....	16 lbs. L. ovary.	"	"	"	"	P H	D	Also large fibroid of womb. Died on sixth day from intestinal obstruction.	"
115	"	Dec. 16, '86.	54	M	9	3	.....	29 lbs. R. ovary.	One.	Parietal and omental.	"	"	P H	R		"
116	"	Dec. 18, '86.	36	M	0	0	.....	15 lbs. R. ovary. 10 lbs. L. ovary.	Both.	Omental and pelvic.	"	Yes.	P H	D	Died in twenty-six hours, from shock. Incomplete operation.	"



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117	Dr. Paul F. Mundé, New York, N. Y.	Jan. 6, '86.	52	M	4	.....	.....	Suppurating dermoid of rt. ovary.	Numerous to intestine and bladder.	Tied, seared and dropped.	None.	H	R		
118	"	Mar. 4, '86.	47	M	1	.....	.....	Suppurating cyst of l. ovary.	.....	"	Yes.	H	D	Previous rupture and subacute peritonitis. Septicæmia.	
119	"	Mar. 31, '86.	40	M	.....	.....	.....	Suppurating cyst of rt. ovary.	Numerous.	"	"	H	D	Septicæmia.	
120	"	May 12, '86.	22	S	0	.....	3 yrs.	Double ovarian cyst.	Left much adherent.	"	None.	H	D	Died on 11th day of Septicæmia. Temp never abv. 101°.	
121	"	Oct. 13, '86.	34	M	4	1	1 yr.	Multiloc. cyst of l. ovary.	Broad; fresh.	"	"	P	R	Pregnant 5 mos. Not interrupted.	N. Y. Obst. Soc. 4m. Journal of Obst.
122	"	Dec. 1, '86.	23	M	.....	.....	.....	Monocyst of l. ovary. Rt. adherent.	Rt. adherent.	"	"	H	R		
123	"	Dec. 5, '86.	63	M	4	.....	8 yrs.	Large monocyst of rt. ovary.	None.	"	"	P	R		
124	"	Dec. 8, '86.	27	M	.....	.....	.....	Suppurating cyst of rt. ovary.	Extensive.	"	Yes.	H	D	Death on 6th d'y from Septicæmia. Wound re-opened and explored, but no pus.	
125	"	Dec. 22, '86.	47	M	3	.....	10 yrs.	Dermoid cysts with hair and bones.	Adhesions of rt. cyst enormous.	"	None.	H	R	Exploratory incision last March, but adhesions thought too extensive.	
126	"	Jan. 5, '87.	30	S	.....	.....	8 mos.	Rt. ovarian cyst. Left hæmatoma.	None.	"	"	H	R	Left hospital on 17th day.	
127	Dr. Jos. Taber Johnson, Wash., D. C.	Feb. 5, '87.	29	S	0	0	1 yr.	Dermoid cyst with bone and teeth.	"	Transfixed, tied and dropped.	"	H	R	Other ovary cystic.	Med. Soc. Dist. of Col.

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128	Dr. Walter F. Atlee, Philad'a, Pa.	May 14, '86.	30	M	3	.....	4 yrs.	20 lbs. Multilocular cyst.	One.	Some omental.	Tied into four and dropped.	.....	P	R	Died of Bright's Disease Aug. 7th.	Specimen presented to College of Physicians.
129	"	July 31, '86.	17	S	.....	.....	4 yrs.	20 lbs. Solid.	"	.....	Clamp.	.....	P	R	Clamp included of left cornu of womb.	
130	"	Nov. 16, '86.	48	M	2	.....	2 mos.	10 lbs. Multilocular.	"	.....	Dropped.	.....	P	R		
131	"	Dec. 8, '86.	50	S	.....	3	10 yrs.	Unilocular and enormous.	.....	All over abdominal parietes.	"	.....	P	R		
132	Dr. Edward J. Hill, Newark, N. J.	Sept. 25, '86.	45	.....	.....	.....	6 mos.	Multilocular cyst of broad ligament.	.....	.....	.....	None.	H	R	Partial removal.	
133	"	Jan. 15, '87.	22	S	.....	.....	6 mos.	8 lbs. Rt. ovary.	Both.	None.	Ligated.	"	P H	R	Left ovary cystic.	
134	Dr. H. O. Hitchcock, Kalamazoo, Mich.	Nov. 11, '86.	17	S	0	0	2 mos.	Sarcoma of rt. ovary and broad ligament.	One.	Omental, parietal and pelvic.	Silk ligature; dropped.	"	P	D	Death from Tetanus on 4th day.	American Lancet, March 1887
135	"	Jan. 11, '87.	36	M	3	0	18 mos.	16 lbs. Simple ovarian cyst.	"	None.	"	"	P	D	Thermometer 29° below zero. Lake wind severe. House poor; comforts none; nursing accidental; Death on 10th day from peritonitis.	No.
136	Dr. R. S. Sutton, Pittsburgh, Pa.	Mar. 7, '87.	31	M	1	0	4 yrs.	30 lbs. Multilocular cyst of rt. ovary.	"	"	Tied, burnt and dropped	"	P H	R		"



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137	Dr. W. Gill Wythe, New York	N. Y. Feb. 15, '86.	36	M	3	10	.....	30 lbs. Multiloc. cyst.	Extensive.	Tied with silk; dropped.	Yes.	H	R	Patient very feeble and nearly died from exhaustion.	N. Y. State Soc. '87. <i>Med. Record</i> , Mar. 19, '87.
138	"	" Mar. 28, '86.	30	M	1	.....	.....	6 lbs. Suppurating cyst.	Complete; over whole surface. Extensive.	Sewed into wound. Tied and dropped.	"	H	R	Patient very feeble; cannot lie down, and too weak to sit up. Died of exhaustion on 4th day.	"
139	"	" Apr. 24, '86.	64	M	5	11	.....	43 lbs. Multiloc. cyst.	.....	"	"	H	D	.....	"
140	"	" Apr. 26, '86.	42	M	3	.....	.....	16 lbs. Multiloc. cyst.	None.	"	None.	P	R	.....	"
141	"	" May 8, '86.	30	M	2	.....	.....	Large cyst filled with papilloma, and a large adherent fibro-cyst of uterus; one on either side of pelvis.	Complete.	Sewed to wound after tying.	Yes.	P	R	Removal of part of tumors.	"
142	"	" Oct. 27, '86.	49	S	.....	.....	.....	Six cysts size of oranges; character doubtful.	Over all surface.	No pedicle.	"	H	R	Two distinct attacks of peritonitis; chronic peritonitis.	"
143	"	" Oct. 29, '86.	53	W	.....	4	.....	80 lbs. Multiloc. suppurating cyst.	To almost every organ in abdomen.	Tied and dropped.	"	P	D	Hectic fever; pulse 140; very feeble; pus discharging from last tapping. Died in 10 days of exhaustion.	"
144	"	" Nov. 6, '86.	43	M	.....	6	4 yrs.	64 lbs. Multiloc. cyst.	To all organs.	"	"	P	R	Hot water used to prevent shock. Septic peritonitis treated by moving bowels.	"
145	"	" Nov. 16, '86.	42	M	1	.....	.....	15 lb. tumor. Ovarian cyst and adherent sarcoma, filling whole pelvis.	Yes.	None.	"	P	R	Hemorrhage; irrigation of abdominal cavity prevented shock. Large sarcoma also removed. Recovery after septic peritonitis.	"

## STATISTICAL TABLES.—OVARICTOMY.

These reports are invariably secured directly from the operator, and they include all of his ovariectomy cases within the period covered by his report.

No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	No. Tappings.	Time since first noticed.	Size and Nature of Tumor.	One or Both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death.)	Remarks.	Reported Elsewhere.
146	Dr. M. H. Richardson, Boston, Mass.	July 13, '86.	40	M	.....	0	2 yrs.	30 lbs. Unilocular, of left ovary.	One.	Very extensive to omentum and colon.	Tied and dropped.	None.	H	R		
147	"	Sept. 7, '86.	23	S	0	0	6 yrs.	12 lbs. Simple monocyst of right ovary.	"	Very extensive; recent.	"	"	H	R		
148	"	Nov. 13, '86.	21	S	0	0	4 yrs.	Unilocular of rt. ovary.	"	None.	"	"	H	R		
149	"	Feb. 12, '87.	35	M	2	0	.....	15 lbs. Multilocular, semi-solid. Left ovary.	"	Extensive.	"	"	PH	R		
150	"	Mar. 15, '87.	33	M	2	0	9 mos.	Multilocular of left ovary; semi-solid.	"	None.	"	"	PH	R		
151	Dr. Jos. Eastman, Indianapolis, Ind.	May 24, '86.	57	M	6	0	.....	20 lb. cyst of rt ovary.	"	"	Ligated.	"	P	R		Indiana Med. Jour. Dec, '86.
152	"	Mar. 22, '87.	27	M	0	0	.....	Ov. Tumor.	"	Bad.	"	"	PH	R		No.
153	Dr. J. R. Weist, Richmond, Ind.	Mar. 14, '87.	59	M	0	0	13 mos.	30½ lbs. Single cyst. Thick walls. Practically no pedicle. Left ovary.	"	Serious adhesions to small intestines.	Silk ligature cut short.	None.	PH	R	Never any fever nor vomiting. Slight cystitis only. Very weak at time of operation. Careful antiseptics; cat-gut sutures externally. Several gallons of fluid in peritoneal cavity; myxoma had escaped from right ovary in to peritoneum. Omentum and all other organs studded with myxomata. Drainage for two weeks. No elevation of temperature. Secondary hemorrhage on fourth day.	"
154	Dr. W. Gill Wylic, New York, N. Y.	Dec. 2, '86.	33	M	.....	.....	.....	Left ovary size of orange, and filled with jelly-like mass. Rt. ovary had burst.	Both.	.....	Tied and dropped.	Yes.	P	R		N. Y. State Soc. '87. Med. Record, Mar. 19, '87.
155	Dr. A. W. Johnstone, Danville, Ky.	Mar. 31, '87.	46	M	11	0	4 mos.	Papillary carcinoma of both ovaries, uterus and portion of peritoneum. Rt. size of cocoonut, L. size of apple.	"	None.	"	"	P	D		



## STATISTICAL TABLES.—OVARIOCTOMY.

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No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	No. of Tappings.	Time since first noticed.	Size and Nature of Tumor.	Ovaries, One or both.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death).	Remarks.	Reported Elsewhere.
156	Dr. Hampton E. Hill, Saco, Me.....	May 29, '86.	49	M	0	0	2 yrs.	60 lbs. Comp. mixed cyst.	One.	Extensive to abdominal wall and intestines. To colon.	Tied and burnt off.	Yes.	P	R	Lower extremities badly swollen.	<i>Pgh. Med. Rev.</i> —June, '87. "
157	"	June 26, '83.	44	M	0	0	1 yr.	18 lbs. Comp. gelatinous cyst of rt. ovary. 1 lb. cyst of lt. ovary.	Both.		"	"	P	R	Right pedicle very short.	"
158	"	Nov. 11, '86.	45	M	1	0	Not noticed.	1 lb. Fibro-cyst.	One.	None.	"	"	P	R	"	"
159	"	Jan. 8, '87.	22	S	0	0	"	3 lbs. Simple cyst.	"	"	"	"	P	R	"	"
160	"	Mar. 24, '87.	53	M	4	0	10 mos.	20 lbs. Colloid.	"	Slight intestinal.	"	"	P	R	Cyst ruptured, and about a gallon of sticky contents among the viscera. Peritonitis.	"
161	"	Apr. 7, '87.	63	S	0	0	Several years.	30 lbs. Comp. cyst of rt. ovary, partly fluid, partly gelatinous. Scirrhus of lt. ovary.	Both.	Slight intestinal.	"	"	P	R	"	"
162	"	May 31, '87.	47	M	5	1	1 yr.	Total wt. 38 lbs. 14½ lbs. solid.	One.	Adherent everywhere, except on very back part.	Tied, cut and dropped.	"	P	R	Hemorrhage severe during operation.	No.
163	Dr. Paul F. Munné, New York, N.Y. Mar. 30, '87.		42	M	3	2	2 yrs.	Large dermoid cyst and small cystic ovary.	Both.	Slight.		None.	P	R	Premature labor of 7 mos. Induced 5 weeks before operation; living child.	
164	"	Apr. 6, '87.	33	M	2	6	6 yrs.	Small monocyst of lt. ovary. Rt. ovary and tube adherent.	"	Complete.	Tied, seared & dropped.	Yes.	P	R		
165	Dr. J. R. Weist, Richmond, Ind.	May 21, '87.	27	M	1	0	2 yrs.	20½ lbs. single cyst of rt. ovary.	One.	None.	Ligated silk & None. dropped.	None.	P	R		No.
166	Dr. A. S. v Mansfelde, Ashland, [Neb.	Mar. 16, '86.	45	M	.....	0	1 yr.	13 lbs. unilocular cyst.	"	"	Dropped.	"	P	R		Nebraska R.R. Sur. So.
167	"	Apr. 23, '86.	41	M	0	0	"	30 lbs. multilocular cyst.	"	Severe.	"	"	P	R		"

## STATISTICAL TABLES.—OVARIOTOMY.

These reports are invariably secured directly from the operator, and they include all of his ovariectomy cases within the period covered by his report.

No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	Tappings.	Time since first noticed.	Size and Nature of Tumor.	One or both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	(Recovery or Death.)	Remarks.	Reported Elsewhere.
168	Dr. A. Vander Veer, Albany, N. Y.	Feb. 19, '86.	30	M	8	.....	19 mos.	27 lbs. Unilocular.	Both.	Slight.	Tait knot.	.....	H	R	Excellent health in April, '87.	.....
169	"	Mar. 25, '86.	26	S	.....	.....	11 mos.	17 lbs. Unilocular.	"	None.	"	.....	H	R	.....	.....
170	"	May 17, '86.	47	M	.....	.....	5 mos.	20 lbs. Multilocular.	One	Firm and vascular over right side.	"	.....	H	R	Seven ligatures and thermo-cautery required for adhesions.	.....
171	"	May 26, '86.	27	S	.....	.....	3 yrs.	23 lbs. Simple ovarian cyst.	"	None.	"	.....	H	R	Health splendid in April, '87. Menstruation normal.	.....
172	"	Oct. 13, '86.	62	M	9	.....	9 mos.	37 lbs. Unilocular.	"	"	"	.....	H	R	.....	.....
173	"	Oct. 21, '86.	26	M	2	.....	19 mos.	13 lbs. Unilocular.	Both.	Many; all over tumor.	"	.....	H	R	Very fat and well in June, '87.	.....
174	"	Jan. 20, '87.	49	.....	.....	.....	2 yrs.	Solid tumor of right ovary.	.....	Many adhesions; many ligatures used.	.....	Yes.	H	D	Tumor enucleated. Death from exhaustion.	No.
175	"	Feb. 10, '87.	70	M	6	3	16 mos.	42 lbs.	Both.	Extensive and firm.	Tait knot.	.....	P	R	Many ligatures and thermo-cautery. Excellent condition in June, '87.	.....
176	"	Mar. 11, '87.	33	M	3	.....	5 yrs.	16 lbs. Multilocular.	One.	Omental.	"	.....	H	R	.....	.....
177	"	Apr. 12, '87.	25	S	.....	.....	9 mos.	14 lbs. Unilocular.	Both.	Slight.	"	.....	H	R	Sinus from incision, July 30, '87.	.....
178	"	Apr. 28, '87.	47	M	2	.....	22 mos.	20 lbs. Multilocular of rt. ovary.	One.	Some.	"	.....	H	R	.....	No.
179	Dr. H. O. Hitchcock, Kalamazoo, Mich.	May 9, '87.	71	M	10	1	1 yr.	40 lbs. Mono-cyst.	"	None.	"	None.	P	R	.....	"
180	Dr. Thos. J. Maxwell, Keokuk, Iowa.	Mar. 31, '86.	35	W	0	0	1 yr.	10 lbs. Mono-cyst.	"	Slight to abdominal wall.	Tied and dropped.	"	P	R	Embolism of right lung on 9th day protracted convalescence.	"
181	Dr. Washington Akin, Troy, N. Y. ...	July 14, '87.	37	M	1	2	3 yrs.	Cyst held nearly two large pails of fluid.	Both.	Not formid-able.	Tied silk & dropped.	Yes.	H	R	Rapid recovery, and is now (Aug. 21) doing light house-work.	"



# STATISTICAL TABLES.—OVARIOCTOMY.

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No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	No. of Tappings.	Time since first noticed.	Size and Nature of Tumor.	Both (Ovaries).	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: Recovery or Death.	Remarks.	Reported Elsewhere.
182	Dr. Jos. Eastman, Indianapolis, Ind.	June 29, '87.	65	M	4	0	1 year.	Two cysts, one and twelve pounds respectively. Contents gelatinous.	Both.	None.	Intra-peritoneal; tied and burnt.	Yes.	P H	R	One cyst of each ovary.	No.
183	"	July 7, '87.	30	M	1	0	2 yrs.	Suppurating cyst, fifteen pounds pus.	.....	Extensive to bowel and abdominal wall.	Tied and burnt.	"	P	R	Septic, with resulting hectic.	"
184	"	July 21, '87.	32	M	3	0	18 mos.	6 lbs. fluid, bloody serum-like.	One.	None.	Cnt., tied and burnt.	None.	P H	R	Very broad pedicle.	"
185	"	July 23, '87.	42	M	0	0	4 yrs.	5 lbs. Fibro-cystic.	"	Yes.	Tied and burnt.	Yes.	P H	R	Cystic part ruptured; pedicle beginning to degenerate.	"
186	Dr. N. B. Carson, St. Louis, Mo....	July 9, '86.	54	W	2	0	2 yrs.	Large multilocular.	"	None.	Ligated.	None.	H	R	.....	"
187	"	Aug. 15, '86.	52	M	0	0	18 mos.	Small multilocular.	"	"	"	"	P	R	.....	"
188	"	Nov. 15, '86.	21	S	0	0	1 year.	Large multilocular.	"	Extensive.	"	"	H	R	.....	"
189	Dr. Wm. H. Myers, Fort Wayne, Ind.	June 23, '87.	42	W	0	0	.....	Two tumors, each the size of a child's head; rt. multilocular; l. unilocular.	Both.	None.	Intra-peritoneal.	Yes.	H	R	.....	"
190	"	Oct. 13, '87.	23	S	.....	0	2 yrs.	35 lbs. Multilocular.	"	Omental.	"	None.	H	R	Rt. ovary enlarged; size of small orange; surface studded with vesicles.	"
191	Dr. J. R. Weist, Richmond, Ind....	Sept. 19, '87.	51	W	5	0	1 year.	15 lbs. Compound cyst of rt. ovary. Tumor nearly solid. Large and short pedicle.	One.	None except to fundus of silk canter-uterus.	Ligated to fundus of silk canter-uterus.	"	P H	R	There had been complete proclivitas for 8 years. Uterus easily returned. At operation stump of attachment to fundus sutured to abdominal wall, uterus being first replaced. Pedicle 1 inch in diam.	"
192	Dr. Frank K. Owen, Ypsilanti, [Mich.	Nov. 4, '86.	29	M	1	0	6 mos.	Double ovarian cyst.	Both.	Extensive.	L. clamped R. ligated silver wire.	"	P	R	.....	Washtenaw Co. Soc. Am. Juncet, June, 1887.
193	Dr. John J. Buchanan, Pittsburgh, [Pa.	Oct. 8, '87.	31	M	3	0	1 year.	3 lbs. Compound cyst of left ovary. Tumor nearly solid. Short, thick pedicle.	"	None.	Tied silk. Peritoneum stitched over pedicle.	Yes.	H	R	Patent bucket-ful of ascites. Tumor partly intraligamentous, closely attached to cornu of womb and surface studded with vesicles. Rt. ovary cystic.	No.

## STATISTICAL TABLES.—OVARICTOMY.

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No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	Tappings.	Time since first noticed.	Size and Nature of Tumor.	One or both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death.)	Remarks.	Reported Elsewhere.
194	Dr. Edward J. Ill, Newark, N. J. ....	Apr. 2, '87.	36	M	1	.....	3 yrs.	Fibro-sarcoma of right ovary.	One.	None.	Ligated.	None.	H	D	Death in 24 hours of hemorrhage from pedicle; though the hemorrhage was checked by re-opening cavity.	.....
195	"	Apr. 23, '87.	30	M	2	.....	1 yr.	33 lbs. Monocyst of right ovary.	"	"	"	"	P H	R	Pregnant 4 months at time of operation.	.....
196	"	Apr. 27, '87.	60	M	3	.....	5 yrs.	Ovarian cyst.	.....	Universal.	.....	.....	H	R	Tumor not removable; opened and sewed to abdominal walls.	.....
197	"	Sept. 24, '87.	31	.....	.....	.....	5 mos.	Multiple cyst of broad ligament. Rupture of cyst; tubercular (?) peritonitis.	One.	Yes.	Tied and dropped.	None.	P H	R	No return of fluid or tumor. Only part of tumor removed.	.....
198	"	Oct. 11, '87.	53	S	.....	.....	30 yrs.	32 lbs. Dermoid of left ovary.	"	Universal.	Ligated.	"	H	R	Twenty ligatures to bleeding points.	.....
199	"	Nov. 5, '87.	33	M	2	.....	2 yrs.	Monocyst of left ovary.	Both.	None.	"	"	P H	R	.....	.....
200	Dr. R. S. Sutton, Pittsburgh, Pa. ....	Jan. 4, '87.	48	M	6	11	5 yrs.	Double multilocular ovarian cyst.	"	Universal.	.....	Yes.	P H	D	Two tumors filled pelvis, fixed uterus and were embedded in the broad ligament. Right was partly enucleated, partly cut out; the left drained. About 75 ligatures used. Death from capillary bronchitis on 6th day.	No.
201	"	Mar. 9, '87.	38	S	0	0	5 yrs.	Enormous fibro-cyst of right ovary.	One.	"	Ligated.	None.	H	R	Nearly 100 lig. used.	<i>P. g. h. Med. Rev.</i> , Apr. '87.
202	"	Oct. 4, '87.	36	M	2	0	2 yrs.	10 lbs. Multilocular cyst.	Both.	Yes.	"	Yes.	P H	R	Left pedicle twisted.	"
203	"	Nov. 5, '87.	36	M	1	0	2 yrs.	12 lbs. Multilocular cyst of right ovary.	"	None.	Tied and burnt.	None.	P H	R	Left ovary also removed.	"
204	"	Nov. 9, '87.	27	M	2	0	3 yrs.	30 lbs. Right parovarian cyst.	One.	Yes, 40 square inches.	"	Yes.	P H	R	Unique on account of adhesions.	"
205	Dr. E. E. Montgomery, Philad'a, Pa.	Apr. 10, '86.	26	M	.....	.....	5 mos.	5 lbs. Multilocular.	"	.....	Tait knot.	.....	P	D	Death from septicaemia on 14th day. Was 8 months pregnant. Labor on 7th day.	Penna. State Soc. Trans. act. 1887.
206	"	May 13, '87.	52	M	9	1	18 mos.	Very large cyst. Ruptured 3 months. Ascites.	"	.....	Intra-peritoneal.	.....	P	D	Abdomen filled with jelly-like material.	No.
207	Dr. J. M. Baldy, Philadelphia, Pa. ...	Sept. 13, '87.	32	M	3	0	2 yrs.	Multilocular ovarian cyst. Other ovary cystic and cirrhotic with cyst of broad ligament.	Both.	Slight.	"	None.	P	R	Out of bed on 3d day and a number of times thereafter. Gen. Soc. Philadel.	Philadel. Gen. Soc.

## LAPAROTOMY FOR REMOVAL OF OVARIES NOT THE SEAT OF TUMOR.

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No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of children.	Duration of Disease.	Pathological Condition or Symptoms necessitating Operation.	One or both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death.)	Effect of Operation upon the condition requiring it.	Remarks.	Reported Elsewhere.
1	Dr. Paul F. Mundé, New York, N.Y.	Apr. 14, '86.	34	M	0	10 yrs.	Double ovarian abscess and pyosalpinx.	Both.	Extensive.	Tied, seared and dropped.	Yes.	H	R	Cure.	Rupture of abscess during removal.	N.Y. Obst. Soc. <i>Amr. Journal of Obst.</i>
2	"	Nov. 3, '86.	26	M	.....	.....	Ovarian abscess.	One.	Too extensive for removal.	Sewed in woud.	"	H	D	.....	Cyst wall inflamed and rotten. Sudden death on 7th day, from rupture of secondary omental abscess.	.....
3	"	Nov. 7, '86.	28	M	.....	2 yrs.	Left ovarian abscess and double pyo-salpinx.	Both.	Complete.	Tied, seared and dropped.	"	H	R	Cure.	.....	N.Y. Obst. Soc. <i>Amr. Journal of Obst.</i>
4	"	Nov. 14, '86.	23	S	.....	2 yrs.	Adherent ovaries.	"	Yes.	"	None.	P	R	"	.....	"
5	"	Nov. 24, '86.	25	M	.....	6 mos.	Left hæmato-salpinx.	One.	"	"	Yes.	H	R	"	Abdominal irrigation during operation.	"
6	"	Dec. 15, '86.	24	M	.....	2 yrs.	Salpingo-oöphoritis.	Both.	Complete.	"	None.	H	R	"	.....	.....
7	"	Dec. 23, '86.	30	M	.....	2 yrs.	Ovarian abscess.	"	Extensive.	"	Yes.	H	D	.....	Abscess burst in removal. Stinking pus. Abdomen irrigated with Thiersch's Solution. Did well for 10 days. Died on 13th day, of Septicæmia.	.....
8	"	Jan. 10, '87.	25	S	.....	8 yrs.	Hystero-and cat-leptiform convulsions.	"	None.	"	None.	P	R	R. relief, so far.	Went out on 18th day.	.....
9	Dr. Jos. Taber Johnson, Wash., D.C.	May 27, '86.	19	S	0	6 yrs.	Dysmenorrhœa with epileptic convulsions.	"	"	Tied & dropped.	"	H	R	Marked improvement. Operation probably curative.	Tubes also removed. Both ovaries cystic.	<i>Va. Med. Monthly</i> , Dec. 1886.
10	"	Oct. 27, '86.	24	M	0	10 yrs.	Ovaro-epilepsy.	"	Yes.	"	"	H	R	Cured.	Tubes also removed.	"
11	"	Feb. 15, '87.	41	M	1	2 yrs.	Uterine fibroid, size of fetal head.	"	None.	"	"	H	R	Too soon to say, but expect a cure.	Tubes also removed.	No.
12	Dr. H. Beates, Jr., Philadelphia, Pa.	May 4, '86.	32	S	0	11 yrs.	Cirrhosis.	"	.....	Ligated with silk.	"	P	R	Cured.	Metro-stasis 24 hours after operation. One apparent menstruation four months later. None since. Tubes also removed.	"



## LAPAROTOMY FOR REMOVAL OF OVARIES NOT THE SEAT OF TUMOR.

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No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	Duration of Disease.	Pathological Condition or symptoms necessitating Operation.	One or both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death).	Effect of Operation upon the condition requiring it.	Remarks.	Reported Elsewhere.
13	Dr. Paul F. Mundé, New York, N.Y.	Feb. 9, '87.	30	M	.....	11 yrs.	Double salpingo-oophoritis.	Both.	Extensive.	Tied seared and dropped.	None.	H	R	.....	Tubes also removed.	.....
14	"	Feb. 23, '87.	25	M	2	.....	Both ovaries and tubes adherent. Tubes much enlarged and filled with mucus-serum. (Great pain and tenderness and high temperature, with pus in both ovaries. Pus in one ovary and tube.	"	Yes.	"	"	P	R	.....	"	.....
15	Dr. M. Price, Philadelphia, Pa.	July 9, '86.	30	M	2	6 yrs.		"	A number.	Silk ligature.	"	P	R	Perfect recovery.	Is now doing her own work; has not done so before for years. Tube also removed.	Philad. Obst. Soc.
16	"	Nov. 2, '86.	27	M	1	1 yr.		One.	None.	"	"	P	R	Now in perfect health. Improved.	"	"
17	Dr. R. S. Sutton, Pittsburgh, Pa.	Jan. 9, '86.	23	S	.....	Several years.	Right pyosalpinx.	"	Yes.	.....	.....	PH	R	Improved. Convulsions near uterus.	"	"
18	"	Mar. 23, '86.	31	M	1	"	Dysmenorrhœa, with convulsions.	"	"	.....	.....	PH	R	.....	"	"
19	"	Apr. 3, '86.	35	W	4	"	Constant pain and mental aberration.	Both.	"	.....	.....	PH	D	.....	Died of uræmia on 8th day. Kidneys contracted. Result of ill-fitting pessary.	"
20	"	Oct. 1, '86.	30	S	.....	"	Ovaritis; right pelvic peritonitis.	One.	"	.....	.....	P	R	Cured.	"	"
21	"	Nov. 20, '86.	36	M	2	18 mos.	Both ovaries cystic, size of eggs.	Both.	None.	.....	.....	PH	R	"	Complicated by parovarian cyst.	"
22	"	Dec. 7, '86.	31	M	1	3 yrs.	Salpingo-ovaritis.	One.	"	.....	.....	PH	R	"	"	"
23	"	Dec. 15, '86.	27	M	1	Several years.	Abscess of left ovary and tube.	"	Yes.	.....	.....	PH	R	"	Bad case. Complicated by parovarian cyst.	"

## LAPAROTOMY FOR REMOVAL OF OVARIES NOT THE SEAT OF TUMOR.

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No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	Duration of Disease.	Pathological Condition or Symptoms necessitating Operation.	One or Both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death.)	Effect of Operation upon the condition requiring it.	Remarks.	Reported Elsewhere
24	Dr. Mary A. D. Jones, Brooklyn, N. Y.	Jan. 20, '87.	20	S	0	3 yrs.	Enlargement, discoloration and pain in right ovary.	One.	Yes.	Intra-peritoneal	.....	H	R	Relieved.	After operation, patient in excellent health.	N. Y. Pathol. Soc.
25	"	Jan. 26, '87.	18	S	0	5 yrs.	Great pain and dysmenorrhoea.	Both.	"	"	.....	H	R	"	"	"
26	"	Jan. 29, '87.	36	M	0	15 yrs.	Enlargement, discoloration and pain.	"	"	"	.....	H	R	"	"	"
27	"	Mar. 9, '87.	43	M	5	13 yrs.	Fibroma and hemorrhage.	"	None.	"	.....	H	R	"	"	"
28	"	Mar. 14, '87.	36	M	3	9 yrs.	Chronic ovariitis and salpingitis.	"	Yes.	"	.....	H	R	"	"	"
29	Dr. Edw. J. Ill, Newark, N. J.	Feb. 10, '86.	28	S	.....	10 yrs.	Cysts of both tubes.	"	"	.....	None.	H	R	Improved.	Left tube removed through vagina later on.	.....
30	"	Oct. 5, '86.	23	S	.....	2 yrs.	"	"	Great.	Ligated.	"	H	R	Cured.	Negress.	.....
31	Dr. D. Longaker, Philadelphia, Pa.	Sept. 25, '86.	36	S	0	14 yrs.	Ovaritis; mania.	"	None.	Dropped.	"	P	R	Temporary.	.....	No.
32	"	Nov. 18, '86.	33	S	1	4 yrs.	Pyo-salpinx; pain.	"	Firm.	"	"	H	R	Cured.	.....	Am. Journal of Obst. Feb. '87.
33	"	Feb. 14, '87.	23	S	1	Indefinite.	Left pyo-salpinx; peritonitis.	One.	"	"	Yes.	P	D	.....	Operation 11 days after delivery of 7 months fetus. Patient had gonorrhoea.	No.

## LAPAROTOMY FOR REMOVAL OF OVARIES NOT THE SEAT OF TUMOR.

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No.	Operator.	Date of Operation.	Age.	Married or Single.	No. of Children.	Duration of Disease.	Pathological Condition or Symptoms necessitating Operation.	One or Both Ovaries.	Adhesions.	Treatment of Pedicle.	Drainage.	Hospital or Private.	Result: (Recovery or Death).	Effect of Operation upon the condition requiring it.	Remarks.	Reported Elsewhere.
34	Dr. Gill Wylie, New York, N. Y.	Jan. 28, '86.	39	M	3	.....	Pyo-salpinx; ovaritis; pelvic abscess.	Both.	Extensive.	Pedicle tied with silk and dropped.	Yes.	P	R	Complete cure in every way.	Tubes also removed. Three sources of pus in right tube, six in Mar. 19, '8	N. Y. St. 4
35	"	Apr. 3, '86.	22	M	1	.....	Pyo-salpinx; ovaritis. Large occluded tubes.	"	Yes.	"	"	H	R	Discharged cured.	Tubes also removed.	"
36	"	Apr. 7, '86.	27	M	.....	.....	Pyo-salpinx; ovaritis; ovaries size of lemons; tubes occluded.	"	"	"	"	P	R	Complete cure but menstruates	Tubes also removed.	"
37	"	Apr. 10, '86.	28	S	.....	.....	Cystic degeneration and enlargement of ovaries. Local pain. Hysterio-epilepsy. Painful uterine fibroids.	"	.....	"	None.	P	R	Local pain cured but had 3 epileptic attacks.	Tubes normal, but removed.	"
38	"	Apr. 19, '86.	32	S	.....	.....	Pyo-salpinx; ovaritis; ovaries size of orange; tubes occluded and large as wrist.	"	.....	"	"	H	R	Discharged cured.	Tubes also removed.	"
39	"	Apr. 21, '86.	27	M	.....	.....	Pyo-salpinx; ovaritis; ovaries size of orange; tubes occluded and large as wrist.	"	Yes.	"	Yes.	P	R	Improved but had 2d operation for part of ovary and abscess.	Tubes also removed.	"
40	"	May 3, '86.	30	S	.....	.....	Intense pain over prolapsed and adherent left ovary.	One.	"	"	None.	P	R	Fatu cured for 2 mos. but returned on other side.	Bedridden.	"
41	"	May 5, '86.	22	S	.....	.....	Left ovary atrophied. Severe and constant pain.	"	.....	"	"	H	R	Discharged cured; remains well.	"	"
42	"	May 10, '86.	28	M	.....	.....	Pyo-salpinx; ovaritis. Tubes occluded.	Both.	Yes.	"	Yes.	H	R	Discharged cured & remains well.	Tubes also removed.	"
43	"	May 12, '86.	33	M	.....	.....	Pyo-salpinx; ovaritis.	"	Dense.	"	"	P	D	.....	Tubes also removed. Part of bloody fluid in two abscesses. Marked indications of intestinal obstruction.	"
44	"	May 20, '86.	33	M	.....	.....	Pyo-salpinx; ovaritis; tubes size of thumb, adherent and occluded.	"	Yes.	"	"	H	R	Discharged well and remains so.	Tubes also removed.	"
45	"	May 26, '86.	45	S	.....	.....	Pyo-salpinx; ovaritis; tubes size of thumb, adherent and occluded.	"	"	"	"	H	R	Discharged cured & is now well.	Tubes also removed.	"



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46	Dr. W. Gill Wylie, New York, N. Y.	May 27, '86.	34	M	.....	.....	Hydro-salpinx. One tube size of orange. Both occluded & adherent.	One.	Yes.	Pedicle tied with silk and dropped.	Yes.	P	R	Perfect cure.	One tube removed.	N. Y. State Soc. Feb. '87.
47	"	May 29, '86.	33	.....	.....	15 yrs.	Typical cystic degeneration of ovaries; constant local pain; confirmed invalid.	Both.	.....	"	None.	P	R	Complete cure in every way satisfactory.	Ovaries were bags of small cysts. Tubes also removed.	Med. Record Mar. 19, '87.
48	"	June 3, '86.	45	M	9	.....	Prolapsed, adherent ovaries, constant intense pain.	"	Yes.	"	"	H	R	For a time better, but no work. Tubes not cured.	Unable to walk also removed.	"
49	"	June 3, '86.	23	M	.....	.....	Pyo-salpinx; ovaritis; pelvic abscess with left ovary in center; tubes occluded & adherent.	"	"	"	Yes.	H	R	Cure complete.	Tubes also removed.	"
50	"	June 3, '86.	33	S	8 yrs.	.....	Prolapsed, adherent ovaries. Local pain.	"	"	"	None.	P	R	Complete cure.	Confirmed invalid for eight years, six years in bed. Tubes also removed.	"
51	"	June 12, '86.	21	S	.....	.....	Cystic degeneration, ovaries enlarged and prolapsed. Local pain.	"	.....	"	"	P	R	Much improved but three yrs. Tubes not yet well.	Pedridden for also removed.	"
52	"	June 19, '86.	32	M	.....	.....	Hystero-epilepsy. Pyo-salpinx; degenerated ovaries. Cysts held a quart of dirty fluid.	"	Extensive.	"	Yes.	P	R	Complete relief but six yrs. ago by still men-Dr. Marion Sims, and closed on account of adhesions.	Tubes also removed.	"
53	"	Oct. 4, '86.	21	S	.....	.....	Prolapse of ovaries; Hystero-epilepsy.	"	.....	"	None.	P	R	Four mos. after operation had no menstruation elev. of temp.	Tubes and pampiniform plexus also removed. No convulsions.	"
54	"	Oct. 4, '86.	30	M	1	.....	Salpingitis; ovaritis; pelvic abscess; pyo-salpinx.	"	Extensive.	"	Yes.	H	R	Discharged cured.	History of severe, local peritonitis. Abscess of several ounces involving tube and ovary. Tubes and abscess sac also removed. Highest temp. 100°.	"

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55	Dr. W. Gil. Wylie, New York, N. Y.	Oct. 13, '86.	23			Cystic ovaries. Intense local pain.	Both.		Pedicle tied with silk and dropped.	None.		R	Three months after operation much improved; piniform plexus up & about; also removed. No elev. of temp.	Bedridden; invalid for years. Tubes and pamp. removed; piniform plexus up & about; also removed. No elev. of temp.	N. Y. State Soc. Feb. '87. <i>Med. Record</i> Mar. 19, '87.
56	"	Oct. 16, '86.	25			Salpingitis; ovaritis; pyo-salpinx; tubes indurated and size of thumb.	"	Extensive.	"	Yes.	H	R	Left the hospital in five weeks well.	History of local peritonitis. Tubes removed. Highest temp. 99½°.	"
57	"	Oct. 21, '86.	32	M	3 yrs.	Enlarged and prolapsed ovaries; size of a lemon. Severe pelvic pain.	"	Slight.	"	None	H	R	Discharged cured.	Three years an invalid. Tubes also removed. Highest temp. 101°.	"
58	"	Nov. 4, '86.	30	M	1	Pelvic abscess and pelvic tumor, part of ovary left in first operation 3 mos. ago.	One.	Extensive.	"	Yes.	P	R	Cured but still men- struates reg- ularly.	Abscess due to sup- puration about pedicle of a for- mer operation. Abscess sac also removed. No elev. of temp.	"
59	"	Nov. 15, '86.	27	W		Ovaries diseased; both tubes distend- ed size of wrist with clear fluid.	Both.	Extensive.	"	None.	H	R	Local pain cured but moved she still temp. 99¾°.	Tubes also re- moved. Highest temp. 99¾°.	"
60	"	Nov. 15, '86.	31	S		Pyo-salpinx; dou- ble pelvic abscess; rt. held 3 ounces; left, involving tube and ovary, held 6 ounces.	"	Extensive.	"	Yes.	H	R	Local trou- ble cured of abscess also re- moved. Highest temp. 103½° on primary eighth day.	Tubes and sac removed. Highest temp. 103½° on primary eighth day.	"
61	"	Nov. 18, '86.	31			Ovarian neuralgia.	One.		"	None.	P	R	Cure.	Rt. ovary and tube removed. Six months ago left ovary was re- moved for neural- gia; pain came on in rt. two months later; fibroids in uterus and in ova- ries found at last operation. No elev. of temp.	"

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62	Dr. W. Gill Wylie, New York, N. Y.	Nov. 21, '86.	33	M	.....	8 yrs.	Fibroma of uterus, intense local pain.	Both.	.....	Pedicle tied with silk and dropped.	None.	P	R	Local pain cured but general condition unsatisfactory.	Had been under constant treatment eight years. <i>Med. Record</i> Mar. 19, '87	N. Y. Stat. Soc. Feb. '88.
63	"	Nov. 27, '86.	25	M	.....	.....	Salpingitis; ovaritis; pyo-salpinx.	"	Decided.	"	Yes.	P	R	Complete relief.	Two attacks of peritonitis, last due to stem pessary. Complete invalid. Tubes also removed. Highest temp. 101°.	"
64	"	Nov. 29, '86.	26	M	.....	.....	Pyo-salpinx; tubes enlarged and hardened.	"	Extensive, to intestines, etc.	"	"	H	R	Complete cure.	Tubes also removed. Highest temp. 99½°.	"
65	"	Dec. 6, '86.	31	S	.....	.....	Prolapse of both ovaries. Intense pain for years. Ovaries large and very hard.	"	.....	"	None.	P	R	Local pain cured; general health better.	Small fibromata on uterus and ovaries. Tubes and pampiniform plexus also removed. No elev. of temp.	"
66	"	Dec. 11, '86.	.....	M	.....	5 yrs.	Salpingitis; ovaritis; pyo-salpinx.	"	Extensive.	"	Yes.	P	R	Complete relief.	Several attacks of peritonitis; bedridden for five yrs. History of gonorrhea. Tubes also removed. Highest temp. 100½°.	"
67	"	Dec. 13, '86.	35	W	.....	.....	Pyo-salpinx; fibroids. Tubes enlarged, filled with pus; very adherent. Fibroma of uterus; intense pain; menorrhagia.	"	Yes.	"	"	H	R	Small sinus left but old pains cured.	Tubes and small fibroid also removed, the latter to secure a pedicle.	"
68	"	Dec. 13, '86.	50	S	.....	.....	.....	"	.....	"	None.	P	R	No hemorrhage 3 months after operation for peritonitis; tubal bedridden; otherwise improved.	Inval. for months after operation; unable to go about; treatment for peritonitis; tubal bedridden; otherwise improved. No elev. of temp.	"



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69	Dr. Joseph Eastman, Indianapolis, [Ind.]	Mar. 12, '86.	24	S	1	4 yrs.	Cystic degeneration.	Both.	.....	Stafford's knot; intra-peritoneal.	None.	P H	R	Improved.	Tubes also removed.	<i>Indiana Med. Jour.</i> D. C. 1886.
70	"	May 17, '86.	32	M	0	10 yrs.	Salpingitis.	One.	.....	"	"	P H	R	Cured.	"	"
71	"	Aug. 5, '86.	33	S	.....	12 yrs.	Cystic degeneration.	Both.	.....	"	"	P H	R	Much better.	"	"
72	"	Aug. 12, '86.	23	S	.....	7 yrs.	"	"	Yes.	"	"	P	R.	Cured.	"	"
73	"	Sept. 17, '86.	38	M	3	20 yrs.	Congenital defect of rt. ovary and tubes.	"	.....	"	"	P H	R	"	"	"
74	"	Feb. 24, '87.	27	M	0	12 yrs.	Salpingitis and ovari-itis.	"	Yes.	"	"	P H	R	Better.	"	No.
75	Dr. Mary A. D. Jones, Brooklyn, [N. Y.]	Jan. 23, '86.	21	M	0	5 yrs.	Pain and repeated attacks of peritonitis.	"	Large and strong.	Dropped.	Yes.	H	R	Entire relief. Rest'd ovary burst during to health & removal. Tubes also removed.	A large abscess in l. Med. Record Aug. 21, '86	
76	"	Feb. 10, '86.	26	M	2	6 to 10 yrs.	Ovaritis and Salpingitis. Both ovaries enlarged and dislocated.	"	Considerable.	"	None.	P H	R	"	Tubes also removed.	"
77	"	Mar. 31, '86.	23	S	0	5 yrs.	Ovaritis; salpingitis; ovarian hematomas; repeated attacks of peritonitis; constant pelvic pain.	"	Very great.	"	"	P H	R	"	"	"
78	"	Apr. 6, '86.	24	S	0	"	Ovaritis; abscess in rt. ovary; salpingitis; endo-arteritis. Constant pain and repeated attacks of peritonitis.	"	"	"	"	P H	R	"	"	"
79	"	June 17, '86.	21	S	0	8 yrs.	Myo-fibroma; ovaritis.	"	Some.	Intra-peritoneal.	"	H	R	Favorable.	.....	No.
80	"	July, '86.	20	M	0	7 yrs.	Enlarged ovaries, 4 in. in diameter. Pain.	"	Very considerable.	"	Yes.	H	R	"	.....	"
81	"	July, '86.	21	M	1	6 yrs.	Peritonitis; ovaritis; Pyo-salpingitis.	"	Very great.	"	"	H	D	.....	Patient had acute peritonitis and intestinal obstruction.	"
82	Dr. A. W. Johnstone, Danville, Ky.	Sept. 3, '86.	31	M	1	3 yrs.	Repeated attacks of pelvic inflammation. Enlargement to left of uterus. Retro-flexion with remaining pteated pelvic inflammation.	"	Slight.	Tied and dropped.	None.	P	R	Cure.	Tubes also removed.	.....
83	"	Oct. 19, '86.	28	S	.....	Since beginning of men- strua- tion.	"	"	"	"	"	P	R	"	"	.....

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84	Dr. Hampton E. Hill, Saco, Maine.	Jan. 23, '86.	39	S	0	10 yrs.	Bedridden for last two years. Pain, tenderness etc. Pyosalpinx; abscess of broad ligament. Cystic ovary and caseous tube.	Both.	None.	Tied and cut.	Yes.	P	R	Able to go about & improving.	Tubes also removed.	<i>Phila Med. Rec.</i> —June, 1887.
85	Dr. Henry Beates, Jr., Philadelphia, [Pa.]	Apr. 28, '87.	17	S	0	4 mos.		One.	Yes; to uterus and fascia.	Tied and burnt.	"	P	R	Cure.	Extensive dissection; free ligaturing; thermocautery. 3d operation. Rt. appendicitis removed six months before. Tube also removed.	No.
86	"	May 30, '87.	39	S	0	18 yrs.	Rt. ov. cirrhotic; left cystic.	Both.	Very firm.	Ligated.	"	P	D		Adhesions very firm, requiring dissection. Tubes extracted. Tubes at so removed. Death on 4th day from syncope. Incision well healed.	"
87	Dr. J. M. Baldy, Philadelphia, Pa.	Sept. 9, '86.	35	M	0	7 yrs.	Cystic degeneration of ovaries and chronic salpingitis. Lt. pyosalpinx and ovarian abscess.	"	None.	Tied and dropped.	None	P	R	Cured.		"
88	"	Feb. 3, '87.	28	M	1	4 wks		One.	Universal.	"	Yes.	P	R	"	This case was of puerperal origin, 4 weeks after labor. Med. Soc's	Phila. Obst.
89	"	Mar. 31, '87.	31	M	5	7 yrs.	Rt. pyosalpinx and ovarian abscess.	"	"	"	"	P	R	"	Was suffering from general peritonitis at time of operation.	Phila. Obst. Society.
90	"	June 7, '87.	27	M	0	4 yrs.	Ovarian cirrhosis and cystic degeneration.	Both.	Lt. ovary adherent in posterior cul-de-sac.	"	None.	P	R	Don'tful as yet.		Phila. Co. Med. Soc.
91	Dr. Jos. Taber Johnson, Washington D.C.	May 2, '87.	40	M	0	10 yrs.	Myoma of uterus; mes. profuse and dangerous hemorrh's.	"	None.	Transfixed, tied and dropped.	"	PH	R	Perfect recovery.		Med. Soc., D. C.
92	"	May 23, '87.	23	S	0	7 yrs.	Chronic ovaritis.	"	"	"	"	PH	R	Has passed 1 period with no menses.		"
93	Dr. Jos. Eastman, Indianapolis, Ind.	May 23, '87.	32	S	0	2 yrs.	Cystic degeneration of ovaries causing insanity; rt.-angled kink in one tube causing occlusion.	"	"	Tied with silk and dropped.	"	PH	R	Encraging at present. Not yet time to judge fully.		"
94	"	June 14, '87.	30	M	0	5 yrs.	Salpingitis and cystic degeneration of ovaries.	"	Yes.	"	Yes.	PH	R	All that could be de-timed normal size.	Tubes at least 10	
95	Dr. Paul F. Mundé, New York, N.Y.	Mar. 9, '87.	.....	W	0	"	Salpingo-oophoritis.	"	Complete.	Tied, seared and dropped.	None.	H	R	Cured.	Small intestine accidentally injured; running catgut suture.	

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96	Dr. A. Vander Veer, Albany, N. Y.	May 26, '86.	24	S	.....	10 yrs.	Dysmenorrhœa with epileptic convulsions.	Both.	Quite severe.	Tait knot.	None.	H	R	Cure.	Tubes also removed.	<i>Am. Journal of Obs.</i> , May, '87.
97	"	Oct. 6, '86.	19	S	.....	5 yrs.	Cystic ovaries. Dysmenorrhœa with epileptic convulsions.	"	.....	"	"	H	R	Improved in 3 mos. as bad as ever.	.....	"
98	"	Jan. 13, '87.	33	S	.....	18 yrs.	Both ovaries cystic. L. dislocated and painful. Hydatidiform.	"	Slight.	"	"	H	R	Cure.	Tubes also removed.	"
99	"	Feb. 25, '87.	33	M	1	18 mos.	Double salpingo-oophoritis.	One.	Very firm.	"	"	H	R	Improved.	Left ovary and tube removed. Rt. ovary cirrhotic and adherent and impossible of removal.	No.
100	Dr. Richard B. Maury, Memphis, [Tenn.]	Mar. 9, '87.	24	M	1	4 yrs.	Pelvic peritonitis. Double pyo-salpinx. L. ovary acyst. Two thirds of rt. ovary cystic. Confirmed invalidism.	Both.	Extensive and firm.	Staffordshire knot.	Yes.	P H	R	Now has good health. No menstruation since.	Treated 1½ years without benefit. Tubes also removed. Operation difficult on account of adhesions and hemorrhage. Drainage for six days.	"
101	"	May 13, '87.	24	M	1	5 yrs.	Ovaries pale, contracted and cirrhotic. Bedridden for 6 mos. Constant pelvic pain. Dysmenorrhœa. Intractable, severe vaginitis.	"	None.	Tied and cut.	None.	P H	R	Much improved in health, but feeble; no menstruation since.	Tubes healthy, but removed. Operation easy.	"
102	Dr. Jos. Taber Johnson, Washington, [D. C.]	June 26, '87.	23	S	0	7 yrs.	Chronic ovariitis and infantile uterus. Both ovaries cystic; one natural size; the other size of lemon.	"	Yes.	Transfixed, tied and dropped.	"	P H	R	Perfect recovery.	Left hospital well in 3 weeks.	.....
103	Dr. R. A. Kinloch, Charleston, S. C.	Jan. 15, '87.	28	M	0	.....	An invalid for six years with ovarian pain and occasional discharges of pus.	"	None.	Silk ligature.	"	P	R	Menstrual flow stopped since operation; pain greatly relieved.	Tubes also removed. The general appearance indicates that a cure will result.	No.
104	Dr. H. O. Hitchcock, Kalamazoo, Mich.	May 10, '87.	35	M	5	6 yrs.	.....	"	"	Tait knot. Silk ligature.	"	P	R	.....	Tubes also removed. The general appearance indicates that a cure will result.	"
105	Dr. Jas. W. Healdens, St. Joseph, Mo.	Jan. 31, '86.	34	M	0	14 yrs.	Both ovaries enlarged, congested and cystic. Constant pain kept her in bed three weeks of each month.	"	"	Tied and dropped.	"	P	D	.....	Died from double pneumonia on 8th day, from neglect in nursing. Autopsy showed wound healed by first intention and peritoneal cavity clean and healthy.	"



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106	Dr. R. S. Sutton, Pittsburgh, Pa.....	Feb. 17, '87.	24	S	0	6 mos.	L. pyosalpinx.	One.	Yes.	Ligatured.	None.	P H	R	Health improved.	The other ovary and tube removed 11 months before.	No.
107	" " "	April 16, '87.	32	M	0	3 yrs.	Double pyosalpinx.	Both.	None.	"	"	P H	R	Improved.	"	"
108	" " "	April 26, '87.	27	S	0	Chronic	Salpingitis.	"	Yes.	"	"	P H	R	Gained 15 lbs. in 6 mos.	"	"
109	" " "	Nov. 17, '87.	31	S	0	9 mos.	Left chronic salpingitis and ovaritis.	One.	"	"	"	P H	R	"	Right ovary and tube removed one year ago.	"
110	Dr. E. E. Montgomery, Philad'a, Pa. Jan. 17, '87.	Jan. 17, '87.	26	M	2	4 yrs.	Menstrual insanity; tender and prolapsed ovaries.	Both.	Slight.	Tait knot.	"	H	R	Cure.	Tubes also removed.	<i>Med. &amp; ca. Register.</i>
111	" " "	April, '87.	35	S	"	3 yrs.	Contiguous pain; ovaries enlarged.	"	Extensive.	"	"	H	R	"	Tubes also removed.	No.
112	" " "	Oct. 6, '87.	33	M	1	10 yrs.	Cystic ovaries; hemorrhage and pain.	"	"	"	"	P	R	Improved.	Tubes also removed.	"
113	" " "	Nov. 21, '87.	37	M	2	15 yrs.	Cystic and prolapsed ovaries.	"	"	"	"	P H	R	"	Was 2½ months pregnant.	"
114	Dr. N. B. Carson, St. Louis, Mo.....	Dec. 29, '86.	22	S	0	3 yrs.	Hystero-epilepsy.	"	Left adherent.	Ligated.	None.	H	D	"	"	Society.
115	Dr. Virgil O. Hardon, Atlanta, Ga...	Sept. 15, '87.	34	M	0	36 hrs.	Acute peritonitis from rupture of abscess of left ovary.	One.	Yes.	Tied with carbonized silk and dropped.	"	P	D	"	Died from shock in two hours after operation. A discharge of pus from the navel had existed for 14 years. There had been frequent attacks of acute peritonitis during that time.	No.

# LAPAROTOMY FOR OTHER PURPOSES THAN THE REMOVAL OF OVARIES.

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No.	Operator.	Date of Operation.	Sex.	Age.	Duration of Disease.	Pathological Condition or symptoms necessitating Operation.	Nature of Operation.	Drainage.	Hospital or Private.	Result: (Recovery or Death)	Effect of the operation upon the condition requiring it.	Remarks.	Reported Elsewhere.
1	Dr. Paul F. Mundé, New York, N. Y.	Jan. 20, '86.	F	44	3 yrs.	17 lb. Pediculated Fibro-myoma.	Hysterectomy.	None.	H	D		Adhesion to intestines, &c. Pedicle clamped. Secondary hemorrhage from mesenteric adhesions. Transfusion of saline fluid; wound re-opened.	
2	Dr. D. W. Cheever, Boston, Mass.	'86.	M	27	4 weeks	Perityphilitis and abscess.	Two incisions in abdomen.	Yes.	H	R	Cure.		Sussex Dist. Med. Soc.
3	"	'86.	M	25	6 days.	Volvulus and peritonitis.	Cut in <i>linea semituberosa</i> .	"	H	D			"
4	"	'86.	M	21	4 days.	Hernia and mortification.	Herniotomy, followed by cut in abdomen and excision of gut and suture.	No.	H	D			"
5	Dr. N. P. Dandridge, Cincinnati, O.	Oct. 12, '86.	F	4	6 mos.	Stricture of Esophagus from swallowing washing fluid.	Gastrotomy.		P	R	Stricture remained impermeable.	Child contracted measles, and the wound, which had healed, ulcerated and was attacked by erysipelas. Child died 2 months after operation.	
6	Dr. Henry Beates, Jr., Phila., Pa.	Sep. 14, '86.	F	43	.....	Abscess of rt. ovary.	Exploratory incision.		P	R	None.	Adhesions universal and of such a character as to prevent removal.	No.
7	"	Dec. 9, '86.	M	51	4 mos	Tumor of omentum or hepatic flexure of colon.	"	No.	P	R	"	Mass involved omentum and colon, and could not be removed.	"
8	Dr. J. R. Weist, Richmond, Ind.....	July 13, '86.	F	47	3 yrs.	Fibro-cystic tumor of uterus.	Hysterectomy.	Yes.	P	D		Removal very difficult because of adhesions. Death on 5th day from peritonitis.	"
9	"	July 15, '86.	F	37	2 yrs.	Cyst of rt. kidney supposed to be ovarian.	Cyst treated by aspiration. Not removed.	No.	P	H	Cured.	Recovery rapid.	"

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10	Dr. Robt. T. Morris, New York, N. Y.	Mar. 18, '86.	F	17	4 days.	Puerperal peritonitis; patient comatose.	Two-inch incision in <i>Sip'n linea alba</i> . Cavity flushed with hot water.	In <i>Sip'n</i> drainage.	P	D	Marked improvement for few hrs.	Operation as a last hope only.	<i>Annals of Surgery</i> , Dec., '86.
11	"	June 27, '86.	F	52	13 yrs.	Gall-stones in abdominal cavity. Chronic peritonitis.	Incision from sternum to pubes; separation of adhesions; cholecystotomy.	For cystic duct only.	P	R	Cure.		"
12	"	July 20, '86.	F	60	.....	Chronic pelvic peritonitis.	Five-inch exploratory incision in <i>linea alba</i> .	None.	P	R	No effect.	Cause not discovered.	"
13	Dr. M. Price, Philadelphia, Pa.	Sep. 25, '86.	M	37	3 yrs.	Adhesions due to traumatism.	Laparotomy for releasing adhesions.	"	P	R	Left operator's hands in good condition.		No.
14	Dr. Edward J. Ill, Newark, N. J.	Apr. 18, '86.	F	39	6 yrs.	Fibro-cyst of uterus.	Partial removal.	"	P H	R	Tumor ceased to grow. Improvement.	30 lbs. fluid removed.	.....
15	"	May 1, '86.	F	40	.....	Adherent ovaries and double pyo-salpinx.	Exploratory.	.....	H	R	.....	Adhesions too great for removal.	.....
16	"	Jan. 22, '87.	F	56	2 yrs.	Chronic tubercular peritonitis.	"	Yes.	H	D	.....	Death on 12th day from exhaustion.	.....
17	"	Feb. 12, '87.	F	44	4 yrs.	Fibro-cyst of uterus.	"	None.	H	R	.....	Not removable on account of universal adhesions.	.....



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18	Dr. W. Gil Wylie, New York, N. Y.	Jan. 21, '86.	F	47	Several years.	Large, irreducible, umbilical hernia, skin ulcerating; painful.	Laparotomy; reducing and sewing up hernia.	None.	H	R	Hernia was cured.	Very fat woman.	N. Y. State Soc. Feb. 87 <i>Med Record</i> Mar. 19, '87.
19	"	Feb. 4, '86.	F	29	6 mos.	Small ventral hernia following use of drainage tube after former laparotomy.	Laparotomy and sewing up hernia.	"	P	R	Hernia cured.		
20	"	Feb. '86.	F	30		Very large ventral hernia after former laparotomy.	Laparotomy and sewing up hernia.	"	H	R	Hernia cured.	About all the intestine and part of stomach hang out; the ring and mass reaches half way to knees.	"
21	"	Mar. 20, '86.	F	36		General acute suppurative peritonitis due to bursting pyosalpinx.	Laparotomy; washed out and drained.	Yes.	H	D		Patient in very bad condition; pulse 150. Large gangrenous abscess evacuated.	"
22	"	Apr. 12, '86.		32		Abdominal dropsy from tubercular peritonitis.	Laparotomy and permanent drainage.	"	H	R	General condition much improved.		"
23	"	May 20, '86.	F	30		Prolapsed, slightly adherent ovaries.	Uterine appendages loosened from adhesions.	None.	H	R	For a time patient better but no permanent effect.		"
24	"	May 26, '86.		54		Abdominal dropsy from tubercular peritonitis.	Laparotomy and permanent drainage.	Yes.	H	R	General health improved and patient comfortable.		"
25	"	Sept. 21, '86.	F	44		Multiple myomata; severe hemorrhages.	Hysterectomy.	None.	P	R	Complete relief of both general and local trouble.	Uterus inaccessible from vagina; supra-pubic wire. Stump externally. Highest temperature 100°.	"
26	"	Oct. 10, '86.	F	50	4 days.	Intestinal obstruction. Band of adhesion size of lead pencil completely occluded ileum.	Tying and cutting constricting band.	"	P	R	Recovery complete.	Peritonitis 10 years ago from sounding to diagnose fibroid; complete obstruction for four days.	"
27	"	Dec. 8, '86.	F	22		Pelvic abscess and fibroid tumor.	Abdominal incision.	Yes.	P	R	No permanent relief given by operation.	Three weeks later large abscess was drained by vagina.	"
28	"	Dec. 21, '86.		35		Perforating gall-stone.	Exploratory incision.	None.	P	R	No bad effect & since the operation no return of colicky pains.	Fundus of gall-bladder drawn backward and adherent walls thickened; stone out of reach posteriorly; sac not disturbed.	"

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29	Dr. M. H. Richardson, Boston, Mass.	Aug. 5, '86.	M	37	11 mos.	Lodgment of plate of false teeth in esophagus. Inanition threatened.	Gastrotomy with extraction of teeth from esophagus.	None.	H	R	Cure.	Plate detected by digital manipulation with hand and forearm introduced into great Scur. stomach.	<i>Boston Med. Dec. 16, '86.</i>
30	"	Aug. 18, '86.	F	23	1 hour.	Starb with sharp knife into abdominal cavity. No symptoms.	Enlargement of cut and examination of intestines.	"	H	R			
31	"	Sep. 17, '86.	F	65	5 days.	Gangrene of loop of intestine with herniotomy done four days before.	Laparotomy, resection and suture of intestine.	Yes.	H	D		Death from shock. Sutured bowel found in good condition with perfectly tight joint.	
32	"	Oct. 8, '86.	F	44	8 mos.	Cancer of stomach.	Exploratory incision. No operation on stomach practicable.	None.	H	R	None.		
33	"	Mar. 14, '87.	F	40	18 mos.	Intra-mural lymphangiectatic fibromyoma of uterus.	Hysterectomy, but uterine canal not opened. Elastic ligature and extra-peritoneal treatment of pedicle.	"	H	D		Death on fifth day from volvulus and strangulation with gangrene of bowel.	
34	Dr. A. W. Johnstone, Danville, Ky.	Sep. 5, '86.	F	40	5 mos.	General tubercular peritonitis.	Laparotomy with drainage.	Yes.	P	R	Cure.		
35	"	Oct. 10, '86.	F	54	10 years.	Suppurative calculous nephritis.	Enucleation of kidney with 3 large and many small stones.	"	P	D	Urine cleared of all signs of pus.	Had secondary abscesses for six months before.	
36	"	Nov. 6, '86.	F	32	3 mos.	Ruptured tubal pregnancy with peritonitis.	Primary laparotomy with removal of 3 mos. fetus and tube.	"	P	R	Cure.		<i>Med. Record, Feb. 24, '87.</i>
37	"	Jan. 10, '87.	F	36	10 w'ks.	Intussusception of 4 feet of colon.	Laparotomy with resection by reverse peristalsis.	"	P	R	"		
38	"	Feb. 22, '87.	F	31	1 year.	Suppurating cyst of urachus.	Laparotomy with introduction of circular drainage.	"	P	R	"		
39	"	Mar. 25, '87.	F	28	11 w'ks.	Suppurating pelvic hematocoele.	Laparotomy with abdominal drainage.	"	P	R	"	Discharge almost stopped, but still kept wound open with small rubber tube.	<i>Ind. Med. Journ., Dec. 1, '86.</i>
40	Dr. Jos. Eastman, Indianapolis, Ind.	Sep. 9, '86.	F	49	2 years.	Encephaloid cancer of left ovary surrounding rectum.	Exploratory incision.	"	P	R	None.	Entire recovery from operation. Death 2 weeks later from the disease.	<i>Ind. Med. Journ., Dec. 1, '86.</i>
41	"	Feb. 3, '87.	F	35	4 years.	6 lb fibroid of uterus.	Hysterectomy.	"	P H	R	Cured.		No.

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42	Dr. L. McLane Tiffany, Baltimore, Md.	Mar. 21, '86.	F	73	7 days.	Obstruction of bowel by peritoneal band at torn through; small gut twisted; splenic flexure of colon.	Belly opened; band cut through; small gut burst while outside of cavity; gut sewed and returned.	None.	P	D	Gas and feces at once began to pass <i>per anum</i> .	Negress. Did not react from operation.	No.
43	"	July 3, '86.	F	50	4 days.	Adhesion of gut to belly wall with obstruction.	Laparotomy and resection of gut.	"	P	D	.....	Died same day.	"
44	"	Aug., '86.	M	28	Some months.	Splenic tumor.	Laparotomy for digital examination.	"	H	R	.....	.....	"
45	"	Mar., '87.	M	24	Several months.	Abscess of liver.	Belly opened; peritoneum sewed to liver; abscess opened and drained.	"	P	R	Cure.	Abscess contained two quarts or more.	"
46	"	Mar. '87.	F	11	3 weeks.	Purulent peritonitis.	Laparotomy and irrigation.	Yes.	P	R	Feces still not yet healed.	Child tuberculous; vomited in lungs.	"
47	Dr. Paul F. Mundé, New York, N. Y.	Mar. 17, '87.	F	32	.....	Intestinal obstruction.	Laparotomy with release of constricting bands.	.....	P	D	.....	Stercoraceous vomiting. Numerous bands constricting small intestine, 6 feet of which was black. Operation not permitted early enough. Death from exhaustion 16 hours later. Patient was operated on by Dr. Mundé for ovarian tumor, Oct. 13, 1886 (see case 121), during pregnancy. Child born March 5, 1887.	.....
48	"	Mar. 31, '87.	F	37	7 years.	Hernioma of left broad ligament.	Laparotomy: endeavor to sew edges of ligament into abdominal wound.	Yes.	.....	D	.....	Severe, deep hemorrhage requiring intestines all to be drawn out. Shock severe. Rallied and did well for six days then suddenly took peritonitis and died on the 11th day.	.....
49	Dr. J. M. Baldy, Philadelphia, Pa.	July 14, '86.	F	43	7 years.	Double inflammatory tubal disease.	Incomplete operation for removal of tubes and ovaries.	None.	P	R	Entire relief for 3 or 4 mos. Later, return of symptoms.	Operation not completed on account of adhesions, it being impossible to even reach the pelvic inlet. Intestines glued to each other and to abdominal wall and matted over pelvic inlet.	No.



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50	Dr. Thos. J. Maxwell, Keokuk, Ia.	Oct. 24, '86.	F	43	1 year.	Encysted ascites of tubercular character.	Opening abdomen and sac filled with ascitic fluid.	None.	H	R	Progress of disease retarded. Marked improvement in few months; died July '87.	Case simulated ovarian disease.	No.
51	" " "	Dec. 4, '86.	F	30	Uncertain.	Uterine fibroid with peritonitis.	Exploratory incision.	"	H	D	"	Tumor and appendage so matted together as to make removal impossible. Rubber drain placed from wound in liver.	"
52	Dr. Jas. W. Heddens, St. Joseph, Mo.	Feb. 28, '86.	M	30	"	Pistol shot wound through peritoneal cavity and into liver.	Incision $5\frac{1}{2}$ inches; removal of blood and foreign body.	Yes.	P	R	Restored to natural functions.	Rubber drain placed from wound in liver.	Mo. State Med. Assoc. 1886.
53	" " "	Nov., '86.	M	26	"	Thick knife wound of peritoneal cavity.	Enlargement of wound and removal of blood.	None.	P	R	"	"	No.
54	Dr. Joseph Eastman, Indianapolis, [Ind.]	May 16, '87.	F	48	6 yrs.	Pelvic abscess, result of hematocoele in right moiety of $\frac{1}{2}$ gal. of pus.	Laparotomy with removal of $\frac{1}{2}$ gal. of pus.	Yes.	PH	R	All that could be desired.	Intermittent discharges of pus per rectum had occurred for six years.	St. Louis Med. Review June 11, '87.
55	" " "	May 21, '87.	F	28	2 yrs.	Pelvic abscess, result of hematocoele in broad moiety of 4 oz. pus.	Laparotomy with removal of 4 oz. pus.	"	PH	R	"	Intermittent discharges of pus per rectum had occurred for one year.	No.
56	Dr. R. B. Bontecon, Troy, N. Y.	Apr. 20, '87.	M	78	6 days.	Obstruction of bowels, caused by strangulation of 8 inches of jejunum by mesentery; stereoraceous vomiting.	Free incision; removal of viscera; relief of constriction.	None.	P	D	Immediate cessation of vomiting. Had 2 or 3 free stools after operation.	Seemed to be in fair condition when operation was begun. Death from shock in eight hours.	No.
57	Dr. Richard B. Maury, Memphis, [Tenn.]	June 24, '87.	F	35	5 weeks.	Intra-peritoneal hematocoele and consequent peritonitis; high pulse, fever and chills.	Laparotomy, removal of 2 quarts of liquid blood and coagula and washing out of cavity.	Yes.	P	R	"	Before operation, condition was one of septicemia. Straight recovery.	"
58	Dr. Jos. Taber Johnson, Washington, [D. C.]	June 4, '87.	F	37	17 yrs.	Large uterine fibroids.	Supra-vaginal hysterectomy, including both ovaries and tubes.	"	PH	D	"	Six months in bed. One tumor completely filled pelvis the other rose so high that it was taken for an enlarged kidney.	Med. Soc. D. C.
59	Dr. H. Beates Jr., Philadelphia, Pa.	May 23, '87.	F	55	15 mos.	Carcinoma of omentum. Nodules also in peri-rectal and peri-uterine tissues and retro-peritoneal glands.	Laparotomy and excision of $\frac{2}{3}$ of omentum.	None.	P	R	Temporary marked relief.	The intense agony of omental growths determined the operation. Three years ago removed an ovarian cyst with papillomatous growths on its interior from this patient.	No.

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60	Dr. A. Vander Veer, Albany, N. Y.	Oct. 1, '86.	F	42	8 yrs.	Fibro-cystic tumor of uterus. Tumor very large.	Hysterectomy.	Yes.	H	D	.....	Adhesions very great and secondary hemorrhage from same. Tail clamp.	No.
61	"	Oct. 28, '86.	F	40	5 yrs.	Fibroma from left cornu of uterus.	Removal of uterine fibroma.	"	H	D	.....	Adhesions to small intestines very extensive and firm; hemorrhage from same; pedicle ligated and dropped.	"
62	"	Nov. 18, '86.	F	18	7 mos.	Tuberculosis of peritoneum.	Exploratory incision.	None.	H	R	Cure.	April, '87, in splendid health.	"
63	"	Feb. 4, '87.	F	35	9 yrs.	Uterine fibroid size of large orange; severe hemorrhages.	Exploratory incision.	"	H	R	Improved.	Adhesions too firm to permit removal.	"
64	"	Feb., '87.	F	52	4 yrs.	Fibroma with multilocular ovarian tumor.	Exploratory; large cyst opened.	Yes.	P	D	.....	Death in four weeks from septic condition.	"
65	"	Feb. 17, '87.	F	16	8 mos.	Tuberculosis of peritoneum.	Exploratory incision.	None.	H	R	.....	Died 11 days after from acute pneumonia.	"
66	"	Mar. 15, '87.	F	38	3 yrs.	Fibroma size of fetal head.	Exploratory incision.	"	H	R	None.	Adhesions too great to permit removal.	"
67	Dr. R. A. Kinloch, Charleston, S. C.	Jan. 21, '87.	M	27	5½ hrs	Gun shot wound of small intestines.	Laparotomy; closure of six intestinal perforations; repair of mesentery.	Yes.	H	D	.....	Death on 3d day.	Am. Surg. Assoc., Med. News, July 16, '87.
68	"	June 11, '87.	M	60	2 yrs.	Cyst of mesentery.	Laparotomy; emptying of cyst; connecting it with external wound and drainage.	"	P	R	General health now improving.	.....	No.
69	"	Aug. 16, '87.	M	40	Several mos.	Perivesical abscess following stricture and stone in bladder.	Free opening and drainage.	"	P	R	Health restored.	.....	"
70	Dr. Richard B. Maury, Memphis, [Tenn.]	June 24, '87.	F	35	2 yrs.	Intra-peritoneal hematocoe of great size and consequent peritonitis.	Laparotomy; removal of coagula; lavage of sac.	"	P	R	Cure.	Operation 5 weeks after occurrence of hematocoe; two quarts of blood removed; condition septic; high pulse and temp. and chills; recovered straightway.	"
71	Dr. Jos. D. Bryant, New York, N. Y.	June 22, '86.	M	45	5 days.	Perforation of vermiform appendix.	Median laparotomy; vermiform ap. ligated and removed.	"	P	D	.....	Had general peritonitis at time of operation; died of exhaustion in 12 hours.	Gaillard's Med. Jour.



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72	Dr. Wm. H. Myers, Fort Wayne, Ind.	Aug. 7, '86.	F	35	.....	Femoral Hernia; large irreducible, with obstruction.	Laparotomy and removal of large amount of omentum.	Yes.	H	R	Perfect cure.	.....	No.
73	"	Oct. 4, '86.	F	32	2 yrs.	Enlarged, indurated and wandering spleen and peritoneal abscess.	Splenectomy.	"	H	R	Complete cure.	Hot water used to prevent shock.	<i>Four Am. Med. Assoc. Apr. 2, '87.</i>
74	"	Mar. 28, '87.	F	38	7 yrs.	Excessive enlargement of womb; hemorrhage; rapid impairment of health.	Hysterectomy.	"	P	D	.....	Death from shock in twelve hours.	No.
75	"	July 28, '87.	F	40	7 mos.	Fecal abscess resulting in fistula in right iliac fossa.	Laparotomy.	"	H	R	Abdominal section failed to relieve the fistula; but it was successfully treated by pressure.	The intestinal adhesion was regarded too extensive to justify liberation and closure of the opening in the intestine.	"
76	Dr. N. B. Carson, St. Louis, Mo.	Oct. 29, '86.	M	29	6 hrs.	Gun shot wound of abdomen.	Laparotomy, enterectomy and suture of opening in gut.	"	H	D	.....	Could not cleanse cavity on account of complications.	Society.
77	"	Dec. 13, '86.	M	12	6 days.	Strangulated inguinal hernia.	Median laparotomy and enterectomy.	None.	H	R	Cure.	Bone drain in inguinal wound.	<i>Four Am. Med. Assoc. May 2, '87.</i>
78	"	Jan. 5, '87.	F	42	5 mos.	Cancer of omentum, etc.	Explorative laparotomy.	Yes.	H	D	.....	Died of exhaustion on third day, caused by excessive drain.	No.
79	Dr. Charles A. Jersey, New York, N. Y.	July 2, '86.	M	44	20 hrs.	Pistol shot wound with perforation of intestine.	Median laparotomy and suture of intestines.	None.	H	D	.....	Death from suppurative peritonitis and shock.	<i>Med. Record, Oct. 16, '86.</i>
80	"	Nov. 2, '86.	M	27	36 hrs.	Penetrating stab wound into liver with peritonitis.	Laparotomy at site of wound.	Yes.	H	D	.....	Death from shock.	No.
81	Dr. J. C. Reeve, Dayton, O.	Mar. 24, '86.	M	28	4 days.	Suppurative peritonitis. Supposed obstruction of bowels.	Laparotomy; central incision.	"	P	D	.....	Death on 4th day. Remarks appended under "Surgical Notes."	"
82	"	June 23, '86.	F	19	Several mos.	Peritonitis.	Median laparotomy.	"	P	R	Cure.	.....	<i>Trans. Amer. Gyn. Soc., Vol. II.</i>
83	"	Mar. 23, '87.	F	28	Several mos.	Ascites from malignant disease.	Exploratory laparotomy.	None.	H	R	Null.	Had been tapped several times. Malignant disease found. Death 6 weeks after operation.	No.



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84	Dr. S. W. Gros	Philadelphia, Pa ...	M	23	7 mos.	Suspected abscess, but sarcoma of liver.	Exploratory laparotomy.	None.	H	R	None.	Lied subsequently.	.....
85	"	"	F	37	11 mos.	Strangulation of sigmoid flexure by an ommental band.	Median laparotomy.	"	H	R	Immediate relief.	The colon was so greatly distended as to require two incisions to let out gas before it could be returned.	.....
86	"	"	M	54	3 mos.	Retropertitoneal sarcoma.	"	"	H	R	None.	Diet subsequently.	.....
87	"	"	M	3	1 yr.	Sarcoma of kidney.	Exploratory. Langenbuch's incision.	"	H	R	"	Kidney not removed because opposite kidney and mesenteric glands were sarcomatous.	.....
88	Dr. Virgil O. Hardin	Atlanta, Ga....	F	24	5 mos	Pelvic abscess.	Laparotomy; evacuation of one quart of pus; suture of sac to abdominal wall.	Yes.	P	R	Cure.	Both pus sac and abdominal cavity drained. Gained 11 lbs. in the 4 weeks following operation.	No.
89	Dr. J. M. Baldy	Philadelphia, Pa ...	F	32	2 yrs.	Pelvic abscess with severe septicemia.	Laparotomy.	Glass.	P	R	"	.....	Phil'a Obs. Soc.
90	Dr. R. A. Kintoch	Charleston, S. C.	F	35	Several years.	Large solid tumor, 14 lbs. Retro-cystic; attached to left cornu of uterus.	Laparotomy; pedicle treated externally; rubber and silk ligature.	Yes.	P H	R	"	Bladder accidentally wounded when attached to pedicle. Bladder found sutured with catgut for muscular coat and silk for serous coat. Bladder healed without trouble. Catheter retained 4 days only.	No.
91	Dr. E. E. Montgomery	Phi'a, Pa ...	F	50	2 yrs.	Carcinoma of omentum; ascites.	Exploratory.	.....	P	R	.....	Death in eight weeks.	No.
92	"	"	F	26	2 mos.	Hematocele; hematoma of ovary.	Laparotomy.	.....	P H	R	Cure.	.....	Phil'a Obs. Soc. No.
93	"	"	F	23	3 mos.	Papilloma of ovary and uterus.	Exploratory.	.....	H	R	Improved.	.....	"
94	"	"	F	16	5 days.	Obstruction; tubercular peritonitis.	"	.....	P	R	"	.....	"
95	Dr. R. S. Sutton	Pittsburgh, Pa.....	F	52	1 yr.	Cancer of peritoneum. Abdominal distension and pain.	"	None.	P H	R	None.	.....	"
96	"	"	F	3	.....	Cyst of mesentery; distension and pain.	"	"	P H	D	.....	.....	Pittsburgh Medical Review, Nov., 1887.
97	Dr. H. O. Hitchcock	Kalamazoo, [Mich.	M	35	36 hrs.	Intra-peritoneal rupture of urinary bladder, 6 inches long.	Laparotomy and cal-trut suture of bladder wound.	"	P	D	.....	Patient had been insane for two years and was an inmate of an asylum. Bladder very full at time of injury. Peritoneal cavity washed out with clean water. In two hours urine passed freely and clear through a retained catheter. Death next day.	No.
98	Dr. X. O. Werder	Pittsburgh, Pa....	F	29	Some years	Uterine fibroids; insanity; metrorrhagia.	Removal of fibroids.	"	H	D	.....	.....	"
99	"	"	F	40	7 yrs.	Ascites simulating ovarian cyst.	Exploratory.	"	H	R	None.	Cause of ascites undiscovered.	Atty. Co. Soc.
100	Dr. Edward J. Hill	Newark, N. J.....	F	30	18 mos.	Sarcoma of ovary.	"	"	H	R	"	Extensive adhesions and very large size prevented removal.	.....





